

## ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.



## HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2018  
OF THE CONDITION AND AFFAIRS OF THE

## Aetna Health of Iowa Inc.

NAIC Group Code 0001 0001 NAIC Company Code 95241 Employer's ID Number 42-1244752  
(Current) (Prior)  
Iowa

Organized under the Laws of \_\_\_\_\_ State of Domicile or Port of Entry IA

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [ ] No [X]

Incorporated/Organized 02/07/1985 Commenced Business 01/01/1986

Statutory Home Office 15950 West Dodge Road Omaha, NE, US 68118  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 15950 West Dodge Road  
(Street and Number)  
Omaha, NE, US 68118 800-471-0240  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 15950 West Dodge Road Omaha, NE, US 68118  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 15950 West Dodge Road  
(Street and Number)  
Omaha, NE, US 68118 402-351-7476  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.coventryhealthcare.com

Statutory Statement Contact Frank Ferris Chronister III 717-541-5742  
(Name) (Area Code) (Telephone Number)  
StatutoryReporting@aetna.com 717-526-2888  
(E-mail Address) (FAX Number)

## OFFICERS

President Frank Joseph D'Antonio Corporate Controller Frank Ferris Chronister III  
Vice President and Secretary Edward Chung-I Lee

## OTHER

Kevin James Casey, Senior Investment Officer John Patrick Maroney, Vice President & Treasurer Davin Henry Reinecke, Chief Financial Officer

## DIRECTORS OR TRUSTEES

James Dean Christensen Frank Joseph D'Antonio Richard Noble Sioma #

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Frank Joseph D'Antonio  
President

Edward Chung-I Lee  
Vice President and Secretary

Frank Ferris Chronister III  
Corporate Controller

State of..... Missouri  
County of..... St. Charles

Subscribed and sworn to before me this

13<sup>th</sup> day of February, 2019

NOTARY PUBLIC (Seal)

**PATRICIA S. HARRELL**  
Notary Public - Notary Seal  
STATE OF MISSOURI  
Comm. Number 13803309  
Warren County  
My Commission Expires: Nov. 30, 2021

State of..... Connecticut  
County of..... Hartford

Subscribed and sworn to before me this

18 day of February, 2019

NOTARY PUBLIC (Seal)

**WENDYANN CIANCI**  
Notary Public, State of Connecticut  
My Commission Expires Nov. 30, 2021

State of..... Pennsylvania  
County of..... Montgomery

Subscribed and sworn to before me this

22<sup>nd</sup> day of February, 2019

NOTARY PUBLIC (Seal)

**COMMONWEALTH OF PENNSYLVANIA**  
NOTARIAL SEAL  
KIM E. ROTH, Notary Public  
Whitpain Township, Montgomery County  
My Commission Expires April 25, 2021

- a. Is this an original filing? ..... Yes [X] No [ ]  
b. If no,  
1. State the amendment number .....  
2. Date filed .....  
3. Number of pages attached.....

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D) .....	40,990,173	0	40,990,173	81,652,641
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0	0	0	0
2.2 Common stocks .....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	0	0	0	0
3.2 Other than first liens .....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ .....0 encumbrances) .....	0	0	0	0
4.2 Properties held for the production of income (less \$ .....0 encumbrances) .....	0	0	0	0
4.3 Properties held for sale (less \$ .....0 encumbrances) .....	0	0	0	0
5. Cash (\$ .....9,381,361 , Schedule E - Part 1), cash equivalents (\$ .....2,425 , Schedule E - Part 2) and short-term investments (\$ .....0 , Schedule DA) .....	9,383,786	0	9,383,786	792,533
6. Contract loans, (including \$ .....0 premium notes) .....	0	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0	0
9. Receivables for securities .....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	50,373,959	0	50,373,959	82,445,174
13. Title plants less \$ .....0 charged off (for Title insurers only) .....	0	0	0	0
14. Investment income due and accrued .....	397,014	0	397,014	783,030
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	396,080	238,904	157,176	8,871,175
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ .....0 earned but unbilled premiums) .....	0	0	0	0
15.3 Accrued retrospective premiums (\$ .....0 ) and contracts subject to redetermination (\$ .....211,472 ) .....	211,472	0	211,472	24,924
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	49,070	0	49,070	1,464,446
16.2 Funds held by or deposited with reinsured companies .....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0	1,137
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0	1,107,466
18.2 Net deferred tax asset .....	344,118	37,883	306,235	656,473
19. Guaranty funds receivable or on deposit .....	0	0	0	0
20. Electronic data processing equipment and software .....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ .....0 ) .....	2,073	2,073	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	1	0	1	0
24. Health care (\$ .....68,715 ) and other amounts receivable .....	68,715	0	68,715	348,307
25. Aggregate write-ins for other than invested assets .....	2,433,455	0	2,433,455	1,310,723
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	54,275,957	278,860	53,997,097	97,012,855
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0	0
28. Total (Lines 26 and 27)	54,275,957	278,860	53,997,097	97,012,855
DETAILS OF WRITE-INS				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Recoverable state premium taxes .....	1,547,453	0	1,547,453	172,985
2502. Guaranty fund assessments .....	886,002	0	886,002	1,137,738
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,433,455	0	2,433,455	1,310,723

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$ .....0 reinsurance ceded) .....	3,153,939	49,656	3,203,595	26,380,952
2. Accrued medical incentive pool and bonus amounts .....	3,434,803	0	3,434,803	6,338,682
3. Unpaid claims adjustment expenses.....	50,913	0	50,913	406,524
4. Aggregate health policy reserves, including the liability of \$ .....4,176,399 for medical loss ratio rebate per the Public Health Service Act .....	6,343,384	0	6,343,384	23,096,263
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	48,457	0	48,457	416,610
8. Premiums received in advance.....	27,835	0	27,835	65,757
9. General expenses due or accrued.....	113,854	0	113,854	301,757
10.1 Current federal and foreign income tax payable and interest thereon (including \$ .....0 on realized capital gains (losses)) .....	32,986	0	32,986	0
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	11,767	0	11,767	33,191
13. Remittances and items not allocated.....	32,783	0	32,783	44,312
14. Borrowed money (including \$ .....0 current) and interest thereon \$ .....0 (including \$ .....0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	790,941	0	790,941	1,142,204
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	0
18. Payable for securities lending .....	0	0	0	0
19. Funds held under reinsurance treaties (with \$ .....0 authorized reinsurers, \$ .....0 unauthorized reinsurers and \$ .....0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ .....0 ) companies .....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....	0	0	0	0
22. Liability for amounts held under uninsured plans.....	0	0	0	7
23. Aggregate write-ins for other liabilities (including \$ .....0 current).....	32,266	0	32,266	1,293,625
24. Total liabilities (Lines 1 to 23).....	14,073,928	49,656	14,123,584	59,519,883
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	4,241,000
26. Common capital stock.....	XXX	XXX	1,267,835	1,267,835
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	27,901,617	27,901,617
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	10,704,061	4,082,520
32. Less treasury stock, at cost: 32.1 .....0 shares common (value included in Line 26 \$ .....0 ).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$ .....0 ).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	39,873,513	37,492,972
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	53,997,097	97,012,855
DETAILS OF WRITE-INS				
2301. Abandoned property liability .....	32,266	0	32,266	33,636
2302. Cost share reduction liability .....	0	0	0	1,259,989
2303. ....				
2398. Summary of remaining write-ins for Line 23 from overflow page .....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	32,266	0	32,266	1,293,625
2501. Estimated health insurer fee accrual .....	XXX	XXX	0	4,241,000
2502. ....	XXX	XXX		
2503. ....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	4,241,000
3001. ....	XXX	XXX		
3002. ....	XXX	XXX		
3003. ....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	67,758	527,788
2. Net premium income ( including \$ .....0 non-health premium income) .....	XXX	31,105,777	211,056,525
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	712,899	(1,415,236)
4. Fee-for-service (net of \$ .....0 medical expenses) .....	XXX	0	0
5. Risk revenue .....	XXX	0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	20	348
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	31,818,696	209,641,637
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits .....	196,964	12,707,337	109,006,482
10. Other professional services .....	3,045	196,444	332,342
11. Outside referrals .....	947	61,097	837,852
12. Emergency room and out-of-area .....	29,835	1,924,853	5,320,250
13. Prescription drugs .....	0	4,123,318	47,710,382
14. Aggregate write-ins for other hospital and medical .....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....	0	(360,306)	4,699,528
16. Subtotal (Lines 9 to 15) .....	230,791	18,652,743	167,906,836
<b>Less:</b>			
17. Net reinsurance recoveries .....	0	5	2,313,047
18. Total hospital and medical (Lines 16 minus 17) .....	230,791	18,652,738	165,593,789
19. Non-health claims (net) .....	0	0	0
20. Claims adjustment expenses, including \$ .....383,872 cost containment expenses .....	0	562,437	3,386,123
21. General administrative expenses .....	0	8,607,686	31,901,143
22. Increase in reserves for life and accident and health contracts (including \$ .....0 increase in reserves for life only) .....	0	788,788	0
23. Total underwriting deductions (Lines 18 through 22).....	230,791	28,611,649	200,881,055
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	3,207,047	8,760,582
25. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	0	1,683,856	1,638,104
26. Net realized capital gains (losses) less capital gains tax of \$ .....(143,135) .....	0	(869,820)	(141,990)
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	814,036	1,496,114
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ .....0 ) (amount charged off \$ .....0 )] .....	0	0	0
29. Aggregate write-ins for other income or expenses .....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	4,021,083	10,256,696
31. Federal and foreign income taxes incurred .....	XXX	2,016,508	1,910,696
32. Net income (loss) (Lines 30 minus 31) .....	XXX	2,004,575	8,346,000
<b>DETAILS OF WRITE-INS</b>			
0601. Misc other income .....	XXX	20	348
0602. ....	XXX		
0603. ....	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above) .....	XXX	20	348
0701. ....	XXX		
0702. ....	XXX		
0703. ....	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above) .....	XXX	0	0
1401. ....			
1402. ....			
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) .....	0	0	0
2901. ....			
2902. ....			
2903. ....			
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above) .....	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	37,492,972	29,413,170
34. Net income or (loss) from Line 32 .....	2,004,575	8,346,000
35. Change in valuation basis of aggregate policy and claim reserves .....	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....0 .....	0	0
37. Change in net unrealized foreign exchange capital gain or (loss) .....	0	0
38. Change in net deferred income tax .....	(389,775)	699,657
39. Change in nonadmitted assets .....	1,683,049	(965,855)
40. Change in unauthorized and certified reinsurance .....	0	0
41. Change in treasury stock .....	0	0
42. Change in surplus notes .....	0	0
43. Cumulative effect of changes in accounting principles.....	0	0
44. Capital Changes:		
44.1 Paid in .....	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....	0	0
45. Surplus adjustments:		
45.1 Paid in .....	0	0
45.2 Transferred to capital (Stock Dividend) .....	0	0
45.3 Transferred from capital .....	0	0
46. Dividends to stockholders .....	0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	(917,308)	0
48. Net change in capital and surplus (Lines 34 to 47) .....	2,380,541	8,079,802
49. Capital and surplus end of reporting period (Line 33 plus 48)	39,873,513	37,492,972
DETAILS OF WRITE-INS		
4701. Prior Period MLR Rebate Liability Audit Adjustment .....	(1,161,149)	0
4702. Prior Period Federal Income Tax 2015 MLR Correction Audit Adjustment .....	243,841	0
4703. ....		
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	(917,308)	0

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance .....	25,189,374	196,321,163
2. Net investment income .....	2,583,831	1,828,832
3. Miscellaneous income .....	20	348
4. Total (Lines 1 through 3) .....	27,773,225	198,150,343
5. Benefit and loss related payments .....	45,455,936	139,220,244
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	11,086,975	35,476,396
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ .....0 tax on capital gains (losses) .....	732,921	(4,807,067)
10. Total (Lines 5 through 9) .....	57,275,832	169,889,573
11. Net cash from operations (Line 4 minus Line 10) .....	(29,502,607)	28,260,770
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	39,376,799	20,131,198
12.2 Stocks .....	0	0
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	3	21
12.7 Miscellaneous proceeds .....	0	11,406
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	39,376,802	20,142,625
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	241,250	40,104,434
13.2 Stocks .....	0	0
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	241,250	40,104,434
14. Net increase (decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	39,135,552	(19,961,809)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	0	0
16.6 Other cash provided (applied) .....	(1,041,695)	(8,665,787)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(1,041,695)	(8,665,787)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	8,591,250	(366,826)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	792,535	1,159,361
19.2 End of year (Line 18 plus Line 19.1) .....	9,383,786	792,535

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001. Non-Cash Bond Exchanges .....	0	0
20.0002. Non-Cash Bond Exchanges - Intercompany .....	0	14,142,045

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income .....	31,105,777	30,873,795	0	0	0	231,982	0	0	0	0
2. Change in unearned premium reserves and reserve for rate credit .....	712,899	1,453,817	0	0	0	(740,918)	0	0	0	0
3. Fee-for-service (net of \$ .....0 medical expenses) .....	0	0	0	0	0	0	0	0	0	XXX
4. Risk revenue .....	0	0	0	0	0	0	0	0	0	XXX
5. Aggregate write-ins for other health care related revenues .....	20	20	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6) .....	31,818,696	32,327,632	0	0	0	(508,936)	0	0	0	0
8. Hospital/medical benefits .....	12,707,336	12,694,398	0	0	0	12,938	0	0	0	XXX
9. Other professional services .....	196,445	195,811	0	0	0	634	0	0	0	XXX
10. Outside referrals .....	61,097	60,888	0	0	0	209	0	0	0	XXX
11. Emergency room and out-of-area .....	1,924,853	1,924,171	0	0	0	682	0	0	0	XXX
12. Prescription drugs .....	4,123,319	4,123,319	0	0	0	0	0	0	0	XXX
13. Aggregate write-ins for other hospital and medical .....	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts .....	(360,306)	(360,306)	0	0	0	0	0	0	0	XXX
15. Subtotal (Lines 8 to 14) .....	18,652,744	18,638,281	0	0	0	14,463	0	0	0	XXX
16. Net reinsurance recoveries .....	5	5	0	0	0	0	0	0	0	XXX
17. Total medical and hospital (Lines 15 minus 16) .....	18,652,739	18,638,276	0	0	0	14,463	0	0	0	XXX
18. Non-health claims (net) .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19. Claims adjustment expenses including \$ .....383,872 cost containment expenses .....	562,437	562,437	0	0	0	0	0	0	0	0
20. General administrative expenses .....	8,607,686	8,608,877	0	0	0	(1,191)	0	0	0	0
21. Increase in reserves for accident and health contracts .....	788,788	788,788	0	0	0	0	0	0	0	XXX
22. Increase in reserves for life contracts .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23. Total underwriting deductions (Lines 17 to 22) .....	28,611,650	28,598,378	0	0	0	13,272	0	0	0	0
24. Total underwriting gain or (loss) (Line 7 minus Line 23) .....	3,207,046	3,729,254	0	0	0	(522,208)	0	0	0	0
DETAILS OF WRITE-INS										
0501. Misc other income .....	20	20	0	0	0	0	0	0	0	XXX
0502. ....										XXX
0503. ....										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0	0	0	0	0	0	0	0	XXX
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) .....	20	20	0	0	0	0	0	0	0	XXX
0601. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603. ....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above) .....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301. ....										XXX
1302. ....										XXX
1303. ....										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0	0	0	0	XXX
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0	0	0	0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) .....	30,873,795	0	0	30,873,795
2. Medicare Supplement .....	0	0	0	0
3. Dental only .....	0	0	0	0
4. Vision only .....	0	0	0	0
5. Federal Employees Health Benefits Plan .....	231,982	0	0	231,982
6. Title XVIII - Medicare .....	0	0	0	0
7. Title XIX - Medicaid .....	0	0	0	0
8. Other health .....	0	0	0	0
9. Health subtotal (Lines 1 through 8) .....	31,105,777	0	0	31,105,777
10. Life .....	0	0	0	0
11. Property/casualty .....	0	0	0	0
12. Totals (Lines 9 to 11)	31,105,777	0	0	31,105,777



UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct .....	42,278,968	42,261,935	.0	.0	.0	17,033	.0	.0	.0	.0
1.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1.3 Reinsurance ceded .....	1,415,381	1,415,381	.0	.0	.0	.0	.0	.0	.0	.0
1.4 Net .....	40,863,587	40,846,554	.0	.0	.0	17,033	.0	.0	.0	.0
2. Paid medical incentive pools and bonuses .....	2,543,574	2,532,647	.0	.0	.0	.0	10,927	.0	.0	.0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct .....	3,203,595	3,201,530	.0	.0	.0	2,065	.0	.0	.0	.0
3.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.4 Net .....	3,203,595	3,201,530	.0	.0	.0	2,065	.0	.0	.0	.0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct .....	48,457	48,421	.0	.0	.0	36	.0	.0	.0	.0
4.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.4 Net .....	48,457	48,421	.0	.0	.0	36	.0	.0	.0	.0
5. Accrued medical incentive pools and bonuses, current year .....	3,434,802	3,434,802	.0	.0	.0	.0	.0	.0	.0	.0
6. Net healthcare receivables (a) .....	(279,592)	(279,592)	.0	.0	.0	.0	.0	.0	.0	.0
7. Amounts recoverable from reinsurers December 31, current year .....	49,070	49,070	.0	.0	.0	.0	.0	.0	.0	.0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct .....	26,380,952	26,376,361	.0	.0	.0	4,591	.0	.0	.0	.0
8.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.4 Net .....	26,380,952	26,376,361	.0	.0	.0	4,591	.0	.0	.0	.0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct .....	416,612	416,531	.0	.0	.0	81	.0	.0	.0	.0
9.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.4 Net .....	416,612	416,531	.0	.0	.0	81	.0	.0	.0	.0
10. Accrued medical incentive pools and bonuses, prior year .....	6,338,682	6,327,755	0	0	0	0	10,927	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year .....	1,464,446	1,464,446	0	0	0	0	0	0	0	0
12. Incurred Benefits:										
12.1 Direct .....	19,013,048	18,998,586	.0	.0	.0	14,462	.0	.0	.0	.0
12.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12.3 Reinsurance ceded .....	5	5	0	0	0	0	0	0	0	0
12.4 Net .....	19,013,043	18,998,581	0	0	0	14,462	0	0	0	0
13. Incurred medical incentive pools and bonuses .....	(360,306)	(360,306)	0	0	0	0	0	0	0	0

(a) Excludes \$ .0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct .....	431,513	431,513	.0	.0	.0	.0	.0	.0	.0	.0
1.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1.4 Net .....	431,513	431,513	.0	.0	.0	.0	.0	.0	.0	.0
2. Incurred but Unreported:										
2.1 Direct .....	2,772,082	2,770,017	.0	.0	.0	2,065	.0	.0	.0	.0
2.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.4 Net .....	2,772,082	2,770,017	.0	.0	.0	2,065	.0	.0	.0	.0
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.4 Net .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. TOTALS:										
4.1 Direct .....	3,203,595	3,201,530	.0	.0	.0	2,065	.0	.0	.0	.0
4.2 Reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.3 Reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.4 Net .....	3,203,595	3,201,530	0	0	0	2,065	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) .....	20,909,472	21,352,457	739,114	2,510,837	21,648,586	26,792,891
2. Medicare Supplement .....	0	0	0	0	0	0
3. Dental Only .....	0	0	0	0	0	0
4. Vision Only .....	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan .....	16,814	218	2,065	36	18,879	4,671
6. Title XVIII - Medicare .....	0	0	0	0	0	0
7. Title XIX - Medicaid .....	0	0	0	0	0	0
8. Other health .....	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8) .....	20,926,286	21,352,675	741,179	2,510,873	21,667,465	26,797,562
10. Healthcare receivables (a) .....	0	68,715	0	0	0	348,307
11. Other non-health .....	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts .....	2,503,559	40,014	3,282,679	152,124	5,786,238	6,338,682
13. Totals (Lines 9 - 10 + 11 + 12)	23,429,845	21,323,974	4,023,858	2,662,997	27,453,703	32,787,937

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	5,857	5,857	5,857	5,857	5,857
2.	2014 .....	110,985	136,683	136,683	136,683	136,683
3.	2015 .....	XXX	194,142	225,852	225,852	225,852
4.	2016 .....	XXX	XXX	165,894	184,326	184,326
5.	2017 .....	XXX	XXX	XXX	142,930	166,343
6.	2018 .....	XXX	XXX	XXX	XXX	21,313

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	(68,632)	(68,632)	(68,632)	(68,632)	(68,632)
2.	2014 .....	130,715	156,561	156,561	156,561	156,561
3.	2015 .....	XXX	222,815	255,193	255,193	255,193
4.	2016 .....	XXX	XXX	194,148	213,041	213,041
5.	2017 .....	XXX	XXX	XXX	175,590	203,025
6.	2018 .....	XXX	XXX	XXX	XXX	23,976

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred		1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1.	2014 .....	146,813	136,683	0	0.0	136,683	93.1	0	0	136,683	93.1
2.	2015 .....	263,951	225,852	0	0.0	225,852	85.6	0	0	225,852	85.6
3.	2016 .....	224,519	184,326	0	0.0	184,326	82.1	0	0	184,326	82.1
4.	2017 .....	209,641	166,343	0	0.0	166,343	79.3	4,022	0	170,365	81.3
5.	2018 .....	32,328	21,313	562	2.6	21,875	67.7	2,663	51	24,589	76.1

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Medicare Supplement

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Medicare Supplement

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

Years in which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1. 2014 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2015 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2016 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2018 .....	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Dental Only

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	11	11
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

Years in which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1. 2014 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2015 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2016 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2018 .....	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Vision Only

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Vision Only

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

Years in which Premiums were Earned and Claims were Incurred		1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1.	2014 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
2.	2015 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
3.	2016 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
4.	2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5.	2018 .....	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	923	923	923	923	923
2.	2014 .....	10,547	11,214	11,214	11,214	11,214
3.	2015 .....	XXX	9,603	11,233	11,233	11,233
4.	2016 .....	XXX	XXX	71	96	96
5.	2017 .....	XXX	XXX	XXX	0	17
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	96,482	96,482	96,482	96,482	96,482
2.	2014 .....	11,578	12,255	12,255	12,255	12,255
3.	2015 .....	XXX	11,048	12,688	12,688	12,688
4.	2016 .....	XXX	XXX	70	100	100
5.	2017 .....	XXX	XXX	XXX	0	19
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

Years in which Premiums were Earned and Claims were Incurred		1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1.	2014 .....	14,861	11,214	0	0.0	11,214	75.5	0	0	11,214	75.5
2.	2015 .....	14,934	11,233	0	0.0	11,233	75.2	0	0	11,233	75.2
3.	2016 .....	(650)	96	0	0.0	96	( 14.8)	0	0	96	( 14.8)
4.	2017 .....	0	17	0	0.0	17	0.0	2	0	19	0.0
5.	2018 .....	(509)	0	0	0.0	0	0.0	0	0	0	0.0



UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	2,783	2,783	2,783	2,783	2,783
2.	2014 .....	28,821	32,569	32,569	32,569	32,569
3.	2015 .....	XXX	26,552	29,084	29,084	29,084
4.	2016 .....	XXX	XXX	14,654	14,654	14,654
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	11

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	(8,197)	(8,197)	(8,197)	(8,197)	(8,197)
2.	2014 .....	32,658	36,487	36,487	36,487	36,487
3.	2015 .....	XXX	30,678	33,210	33,210	33,210
4.	2016 .....	XXX	XXX	14,651	14,651	14,651
5.	2017 .....	XXX	XXX	XXX	11	11
6.	2018 .....	XXX	XXX	XXX	XXX	11

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred		1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1.	2014 .....	36,620	32,569	0	0.0	32,569	88.9	0	0	32,569	88.9
2.	2015 .....	34,800	29,084	0	0.0	29,084	83.6	0	0	29,084	83.6
3.	2016 .....	18,064	14,654	0	0.0	14,654	81.1	0	0	14,654	81.1
4.	2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5.	2018 .....	0	11	0	0.0	11	0.0	0	0	11	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

Years in which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1. 2014 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2015 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2016 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2018 .....	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Other

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Other

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior .....	0	0	0	0	0
2.	2014 .....	0	0	0	0	0
3.	2015 .....	XXX	0	0	0	0
4.	2016 .....	XXX	XXX	0	0	0
5.	2017 .....	XXX	XXX	XXX	0	0
6.	2018 .....	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

Years in which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1. 2014 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2015 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2016 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2017 .....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2018 .....	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred						Cumulative Net Amounts Paid				
						1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior					9,563	9,563	9,563	9,563	9,563
2.	2014					150,353	180,466	180,466	180,466	180,466
3.	2015					XXX	230,297	266,169	266,169	266,169
4.	2016					XXX	XXX	180,619	199,076	199,076
5.	2017					XXX	XXX	XXX	142,930	166,360
6.	2018					XXX	XXX	XXX	XXX	21,324

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred						Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
						1 2014	2 2015	3 2016	4 2017	5 2018
1.	Prior					19,653	19,653	19,653	19,653	19,653
2.	2014					174,951	205,303	205,303	205,303	205,303
3.	2015					XXX	264,541	301,091	301,091	301,091
4.	2016					XXX	XXX	208,869	227,803	227,803
5.	2017					XXX	XXX	XXX	175,601	203,055
6.	2018					XXX	XXX	XXX	XXX	23,987

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred		1  Premiums Earned	2  Claims Payment	3  Claim Adjustment Expense Payments	4  (Col. 3/2) Percent	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  (Col. 5/1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10  (Col. 9/1) Percent
1.	2014	198,294	180,466	0	0.0	180,466	91.0	0	0	180,466	91.0
2.	2015	313,685	266,169	0	0.0	266,169	84.9	0	0	266,169	84.9
3.	2016	241,933	199,076	0	0.0	199,076	82.3	0	0	199,076	82.3
4.	2017	209,641	166,360	0	0.0	166,360	79.4	4,024	0	170,384	81.3
5.	2018	31,819	21,324	562	2.6	21,886	68.8	2,663	51	24,600	77.3

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	2	3	4	5	6	7	8	9
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
1. Unearned premium reserves .....	9,095	9,095	0	0	0	0	0	0	0
2. Additional policy reserves (a) .....	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits .....	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including \$ .....0 ) for investment income .....	6,334,290	6,334,290	0	0	0	0	0	0	0
5. Aggregate write-ins for other policy reserves .....	0	0	0	0	0	0	0	0	0
6. Totals (gross) .....	6,343,385	6,343,385	0	0	0	0	0	0	0
7. Reinsurance ceded .....	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4) .....	6,343,385	6,343,385	0	0	0	0	0	0	0
9. Present value of amounts not yet due on claims .....	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits .....	48,457	48,457	0	0	0	0	0	0	0
11. Aggregate write-ins for other claim reserves .....	0	0	0	0	0	0	0	0	0
12. Totals (gross) .....	48,457	48,457	0	0	0	0	0	0	0
13. Reinsurance ceded .....	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7) .....	48,457	48,457	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
0501. ....									
0502. ....									
0503. ....									
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0
1101. ....									
1102. ....									
1103. ....									
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0

(a) Includes \$ .....0 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

	Claim Adjustment Expenses		3	4	5
	1	2			
	Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent (\$ .....0 for occupancy of own building) .....	11,131	3,305	17,669	1,840	33,945
2. Salary, wages and other benefits .....	307,145	107,545	1,131,146	32,902	1,578,738
3. Commissions (less \$ .....0 ceded plus \$ .....0 assumed) .....	0	0	517,952	0	517,952
4. Legal fees and expenses .....	0	0	25,863	37	25,900
5. Certifications and accreditation fees .....	0	0	0	0	0
6. Auditing, actuarial and other consulting services ....	0	25,104	364,747	12,738	402,589
7. Traveling expenses .....	1,593	376	38,438	548	40,955
8. Marketing and advertising .....	(170)	3,207	87,794	0	90,831
9. Postage, express and telephone .....	4,043	13,228	69,813	374	87,458
10. Printing and office supplies .....	0	2,302	34,440	69	36,811
11. Occupancy, depreciation and amortization .....	5,831	2,198	(8,029)	0	0
12. Equipment .....	0	(1,669)	58,060	1,063	57,454
13. Cost or depreciation of EDP equipment and software .....	10	5,108	100,365	751	106,234
14. Outsourced services including EDP, claims, and other services .....	29,475	8,709	667,727	4,905	710,816
15. Boards, bureaus and association fees .....	26	50	3,030	30	3,136
16. Insurance, except on real estate .....	864	323	31,473	28	32,688
17. Collection and bank service charges .....	0	250	1,734	3,591	5,575
18. Group service and administration fees .....	0	0	0	0	0
19. Reimbursements by uninsured plans .....	0	0	(162)	0	(162)
20. Reimbursements from fiscal intermediaries .....	0	0	0	0	0
21. Real estate expenses .....	15	54	24,083	13	24,165
22. Real estate taxes .....	71	0	4,591	0	4,662
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes .....	0	0	0	0	0
23.2 State premium taxes .....	0	0	385,779	0	385,779
23.3 Regulatory authority licenses and fees .....	0	0	993,259	0	993,259
23.4 Payroll taxes .....	23,474	8,219	87,002	2,861	121,556
23.5 Other (excluding federal income and real estate taxes) .....	0	0	4,138,315	0	4,138,315
24. Investment expenses not included elsewhere .....	0	0	0	0	0
25. Aggregate write-ins for expenses .....	365	254	(167,403)	0	(166,784)
26. Total expenses incurred (Lines 1 to 25) .....	383,873	178,564	8,607,686	61,751	(a) .....9,231,874
27. Less expenses unpaid December 31, current year ..	34,749	16,164	113,854	0	164,767
28. Add expenses unpaid December 31, prior year .....	346,194	60,330	301,756	0	708,280
29. Amounts receivable relating to uninsured plans, prior year .....	0	0	1,137	0	1,137
30. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30) .....	695,318	222,730	8,794,451	61,751	9,774,250
DETAILS OF WRITE-INS					
2501. Miscellaneous .....	365	(134)	(78,576)	0	(78,345)
2502. Loss adjustment expense .....	0	0	(355,611)	0	(355,611)
2503. Rx rebate expense .....	0	0	186,548	0	186,548
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	388	80,235	0	80,623
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	365	254	(167,403)	0	(166,784)

(a) Includes management fees of \$ .....3,858,612 to affiliates and \$ .....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds .....	(a) .....253,761	.....209,638
1.1	Bonds exempt from U.S. tax .....	(a) .....0	.....0
1.2	Other bonds (unaffiliated) .....	(a) .....1,751,309	.....1,409,413
1.3	Bonds of affiliates .....	(a) .....0	.....0
2.1	Preferred stocks (unaffiliated) .....	(b) .....0	.....0
2.11	Preferred stocks of affiliates .....	(b) .....0	.....0
2.2	Common stocks (unaffiliated) .....	.....0	.....0
2.21	Common stocks of affiliates .....	.....0	.....0
3.	Mortgage loans .....	(c) .....0	.....0
4.	Real estate .....	(d) .....0	.....0
5	Contract Loans .....	.....0	.....0
6	Cash, cash equivalents and short-term investments .....	(e) .....83,746	.....83,746
7	Derivative instruments .....	(f) .....0	.....0
8.	Other invested assets .....	.....0	.....0
9.	Aggregate write-ins for investment income .....	.....42,810	.....42,810
10.	Total gross investment income .....	2,131,626	1,745,607
11.	Investment expenses .....		(g) .....58,890
12.	Investment taxes, licenses and fees, excluding federal income taxes .....		(g) .....2,861
13.	Interest expense .....		(h) .....0
14.	Depreciation on real estate and other invested assets .....		(i) .....0
15.	Aggregate write-ins for deductions from investment income .....		.....0
16.	Total deductions (Lines 11 through 15) .....		.....61,751
17.	Net investment income (Line 10 minus Line 16)		1,683,856
DETAILS OF WRITE-INS			
0901.	Misc Interest Income .....	42,810	42,810
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	42,810	42,810
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ .....78,102 accrual of discount less \$ .....592,061 amortization of premium and less \$ .....2,084 paid for accrued interest on purchases.
- (b) Includes \$ .....0 accrual of discount less \$ .....0 amortization of premium and less \$ .....0 paid for accrued dividends on purchases.
- (c) Includes \$ .....0 accrual of discount less \$ .....0 amortization of premium and less \$ .....0 paid for accrued interest on purchases.
- (d) Includes \$ .....0 for company's occupancy of its own buildings; and excludes \$ .....0 interest on encumbrances.
- (e) Includes \$ .....83,614 accrual of discount less \$ .....0 amortization of premium and less \$ .....0 paid for accrued interest on purchases.
- (f) Includes \$ .....0 accrual of discount less \$ .....0 amortization of premium.
- (g) Includes \$. .....61,751 investment expenses and \$ .....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ .....0 interest on surplus notes and \$ .....0 interest on capital notes.
- (i) Includes \$ .....0 depreciation on real estate and \$ .....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....	(111)	(267,523)	(267,634)	0	0
1.1	Bonds exempt from U.S. tax .....	0	0	0	0	0
1.2	Other bonds (unaffiliated) .....	(329,645)	(415,681)	(745,326)	0	0
1.3	Bonds of affiliates .....	0	0	0	0	0
2.1	Preferred stocks (unaffiliated) .....	0	0	0	0	0
2.11	Preferred stocks of affiliates .....	0	0	0	0	0
2.2	Common stocks (unaffiliated) .....	0	0	0	0	0
2.21	Common stocks of affiliates .....	0	0	0	0	0
3.	Mortgage loans .....	0	0	0	0	0
4.	Real estate .....	0	0	0	0	0
5.	Contract loans .....	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments .....	3	0	3	0	0
7.	Derivative instruments .....	0	0	0	0	0
8.	Other invested assets .....	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10.	Total capital gains (losses)	(329,753)	(683,204)	(1,012,957)	0	0
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only) .....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	238,904	1,872,952	1,634,048
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset .....	37,883	77,420	39,537
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software .....	0	0	0
21. Furniture and equipment, including health care delivery assets .....	2,073	11,537	9,464
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivable from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable .....	0	0	0
25. Aggregate write-ins for other than invested assets .....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	278,860	1,961,909	1,683,049
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
28. Total (Lines 26 and 27) .....	278,860	1,961,909	1,683,049
DETAILS OF WRITE-INS			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0
2501. Deposits .....	0	0	0
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	0	0	0



EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations .....	1,005	1,603	1,585	1,551	1,352	18,659
2. Provider Service Organizations .....	0	0	0	0	0	0
3. Preferred Provider Organizations .....	0	0	0	0	0	0
4. Point of Service .....	36,858	4,635	4,412	3,864	2,673	49,099
5. Indemnity Only .....	0	0	0	0	0	0
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	37,863	6,238	5,997	5,415	4,025	67,758
DETAILS OF WRITE-INS						
0601. ....	0	0	0	0	0	0
0602. ....	0	0	0	0	0	0
0603. ....	0	0	0	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health Of Iowa Inc. (the “Company”), indirectly a wholly-owned subsidiary of CVS Health Corporation (“CVS Health”), have been prepared in conformity with accounting practices prescribed or permitted by the Iowa Insurance Department (“Iowa Department”) (“Iowa Accounting Practices”). The Iowa Department recognizes only statutory accounting practices prescribed or permitted by the Commonwealth of Iowa for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners’ (“NAIC”) Accounting Practices and Procedures Manual (“NAIC SAP”). On November 28, 2018, CVS Health acquired Aetna Inc. (“Aetna”) and at that date became the Company’s ultimate parent (the “Aetna Acquisition”).

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Commonwealth of Iowa for the years ending December 31, 2018 and 2017 is as follows:

	SSAP #	F/S Page	F/S Line #	2018	2017
NET INCOME					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	2,004,575	8,346,000
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:					
(3) State Permitted Practices that increase/(decrease) NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	2,004,575	8,346,000
SURPLUS					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	39,873,513	37,492,972
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:					
(7) State Permitted Practices that increase/(decrease) NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	39,873,513	37,492,972

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of these financial statements in conformity with Iowa Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenue and expenses. Actual results could differ from those estimates.

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) Cash, Cash Equivalents and Short-Term Investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term

investments approximates fair value. Cash accounts with positive balances shall not be reported separately from cash accounts with negative balances. If in the aggregate, the reporting entity has a net negative cash balance, it shall be reported as a negative asset and shall not be recorded as a liability.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at December 31, 2018 and 2017. Bonds include all investments whose maturity is greater than one year when purchased. Loan-backed and structured securities are carried at amortized cost adjusted for unamortized premiums and discounts. Premiums and discounts on loan-backed and structured securities are amortized using the interest method over the estimated remaining term of the securities, adjusted for anticipated prepayments. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus. Bonds are recorded as purchases or sales on the trade date.

The Company periodically reviews its bonds to determine whether a decline in fair value below the carrying value is other-than-temporary. For bonds, other than loan-backed and structured securities, an other-than-temporary impairment ("OTTI") shall be recorded if it is probable that the Company will be unable to collect all amounts due according to the contractual terms in effect at the date of acquisition. Declines deemed to be OTTI in the cost basis are recognized as realized capital losses. Yield-related impairments are deemed other-than-temporary when the Company intends to sell an investment at the reporting date before recovery of the cost of the investment.

For loan-backed and structured securities, the Company records OTTI when the fair value of the loan-backed or structured security is less than the amortized cost basis at the balance sheet date and (1) the Company intends to sell the investment, or (2) the Company does not have the intent and ability to retain the investment for the time sufficient to recover the amortized cost basis, or (3) the Company does not expect to recover the entire amortized cost basis of the security, even if it does not intend to sell the security and has the intent and ability to hold. If it is determined an OTTI has occurred because of (1) or (2), the amount of the OTTI is equal to the difference between the amortized cost and the fair value of the security at the balance sheet date and this difference is recorded as a realized capital loss. If it is determined an OTTI has occurred because of (3), the amount of the OTTI is equal to the difference between the amortized cost and the present value of cash flows expected to be collected, discounted at the loan-backed or structured security's effective interest rate and this difference is also accounted for as a realized capital loss.

The Company analyzes all relevant facts and circumstances for each investment when performing its analysis to determine whether an OTTI exists. Among the factors considered in evaluating whether a decline is other-than-temporary, management considers whether the decline in fair value results from a change in the quality of the investment security itself, whether the decline results from a downward movement in the market as a whole, the prospects for realizing the carrying value of the bond based on the investee's current and short-term prospects for recovery and other factors. The risks inherent in assessing the impairment of an investment include the risk that market factors may differ from the Company's expectations and the risk that facts and circumstances factored into its assessment may change with the passage of time. Unexpected changes to market factors and circumstances that were not present in past reporting periods may result in a current period decision to sell securities that were not other-than-temporarily-impaired in prior reporting periods.

- (3) The Company did not own any common stock at December 31, 2018 or 2017.
- (4) The Company did not own any preferred stock at December 31, 2018 or 2017.
- (5) The Company did not have any mortgage loans at December 31, 2018 or 2017.

(6) Securities Lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to SSAP No. 103R - Transfers and Servicing of Financial Assets and Extinguishments of Liabilities ("SSAP No. 103R"), collateral required under the Company's securities lending program is carried on the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus as both a receivable and payable. Also pursuant to SSAP No. 103, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty.

The Company did not have any loaned securities at December 31, 2018 and 2017.

(7) The Company did not have any investments in subsidiaries, controlled or affiliated companies at December 31, 2018 or 2017.

(8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2018 or 2017.

(9) The Company did not have any derivatives at December 31, 2018 or 2017.

(10) Aggregate Health Policy Reserves and Related Expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in a manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The PDR Balance of \$788,788 and \$0 was included in aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus at December 31, 2018 and 2017.

Unearned premium reserves ("UEP") are recognized for premiums that are recorded by the Company that have not been earned as of the statement date. The UEP Balances of \$9,095 and \$374,031 were included in aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus at December 31, 2018 and 2017.

The Company is required to make premium rebate payments to customers that are enrolled under certain health insurance policies if specific minimum annual medical loss ratios ("MLR") were not met in the prior year. The Company's results for full-year 2018 and 2017 included estimates of \$4,176,399 and \$4,430,213, respectively, of minimum MLR rebates, which were included in aggregate health policy reserves in the Statutory Statements of Liabilities and Capital and Surplus.

The Company reports liabilities associated with contracts subject to redetermination as aggregate health policy reserves in accordance with SSAP No. 54R – Individual and Group and Accident Health Contracts ("SSAP No. 54R") and SSAP No. 107 - Risk-Sharing Provisions of the Affordable Care Act ("SSAP No. 107").

The Company reported Federal Contingency Reserves of \$669,103 and \$901,085 in aggregate policy reserves at December 31, 2018 and 2017, respectively. The Company reported Affordable Care Act ("ACA") Risk Adjustment Payables of \$0 and \$17,390,934 in aggregate health policy reserves at December 31, 2018 and 2017, respectively.

No additional amounts were included in aggregate policy reserves at December 31, 2018 and 2017, respectively.

(11) Hospital and Medical Costs and Claims Adjustment Expenses and Related Reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid and aggregate health claim reserves include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to

the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing payment patterns, medical cost trends, historical utilization of health care services, claim inventory levels, medical inflation, contract requirement changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

- (12) As a result of CVS Health's acquisition of Aetna Inc. ("Aetna"), Aetna modified its capitalization policy from the prior period related to furniture and equipment ("F&E") and prepaid assets. Under the revised policy, F&E will be capitalized if greater than \$1,000 versus the previous threshold of \$500. Under the new policy, prepaid assets will be capitalized if greater than \$250,000 versus the previous threshold of \$50,000. These revisions are not expected to have a material impact on the financial results of Aetna or its affiliates, including the Company.

(13) Pharmaceutical Rebate Receivables

The Company estimates pharmaceutical rebate receivables based upon historical payment trends, actual utilization and other variables. Pharmaceutical rebates for a quarter are billed to the vendor within forty five days of the completion of the quarter with any adjustment to previously recorded amounts reflected at the time of billing. The Company reports pharmaceutical rebate receivables as health care receivables. Pharmacy rebate receivables not in accordance with SSAP No. 84 – Health Care and Government Insured Plan Receivables or are over 90 days past due are nonadmitted. All rebates are processed and settled with an affiliated entity. The pharmaceutical rebate receivables are more fully discussed in Note 28.

(14) Premiums and Amounts Due and Unpaid

Premium revenue for prepaid health or dental care products is recognized as income in the month in which enrollees are entitled to health or dental care services. Premiums collected before the effective period are reported as premiums received in advance. Premiums related to unexpired contractual coverage periods are reported as unearned premiums in the Statutory Statements of Liabilities, Capital and Surplus (refer to discussion of aggregate health policy reserves and related expenses above).

Nonadmitted amounts consist of all premiums due and unpaid greater than 90 days past due, with the exception of amounts due under government insured plans, which may be admitted assets under certain circumstances. In addition, for any customer for which the premiums due and unpaid greater than 90 days past due is more than a de minimus portion of the entire balance of premiums due and unpaid for that customer, the entire balance of premiums due and unpaid for that customer is nonadmitted. Management also performs a specific review of accounts and based on the results of the review, additional amounts may be nonadmitted. Uncollectible amounts are generally written-off and charged to revenue in the period in which the customer reconciliations are completed and agreed to by the customer (retroactivity) or when the account is determined to be uncollectible by the Company.

(15) Aggregate Health Claim Reserves

The reserve for future contingent benefits includes the estimated cost of services that will continue to be incurred after the Statutory Statements of Liabilities, Capital and Surplus date if the Company is obligated to pay for such services in accordance with contract provisions or regulatory requirements. These balances

are recorded in aggregate health claim reserves in the Statutory Statements of Liabilities, Capital and Surplus and are estimated using a percentage of current hospital and medical costs, which is based on the Company's historical cost experience.

(16) Investment Income Due and Accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2018 and 2017, the Company did not have any nonadmitted investment income due and accrued.

(17) Covered and Uncovered Expenses and Related Liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(18) Fees Paid to the Federal Government by Health Insurers

SSAP No. 106 - Affordable Care Act Section 9010 Assessment ("SSAP No. 106") required (1) that the health insurer fee be recognized in full on January 1 of the fee year (the calendar year in which the assessment must be paid to the federal government), in the operating expense category of insurance taxes, licenses and fees, excluding federal income taxes and (2) that in each data year preceding a fee year a reporting entity pro-ratably accrue by reclassifying from unassigned funds (surplus) to aggregate write-ins for special surplus funds an amount equal to its estimated subsequent fee year assessment. This reclassification has no impact on total capital and surplus and is reversed in full on January 1 of the fee year. On January 22, 2018, Public Law No: 115-120 was signed into law and it imposes a moratorium on the health insurer fee for calendar year 2019. As interpreted in INT 18-02: ACA Section 9010 Assessment Moratoriums, because there is not an ACA Section 9010 fee due in September 2019, there is not an accrual of a liability on January 1, 2019 based on 2018 data year net written premiums. Accrual of a liability on January 1, 2020 for the ACA Section 9010 assessment based on 2019 data year net written premiums and the reclassification from unassigned funds (surplus) to aggregate write-ins for special surplus funds equal to the estimated 2020 fee year assessment accrued in data year 2019 will both continue as prescribed under SSAP No. 106. See Note 22 for disclosure of all amounts related to the health insurer fee for the Company.

(19) The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010's (collectively, "Health Care Reform") Risk Adjustment

Risk Adjustment

Health Care Reform established a permanent risk adjustment program to transfer funds from qualified individual and small group insurance plans with below average risk scores to plans with above average risk scores. Based on the risk of the Company's qualified plan members relative to the average risk of members of other qualified plans in comparable markets, the Company estimates its ultimate risk adjustment receivable or payable for the current calendar year and reflects the impact as an adjustment to its premium revenue in accordance with SSAP No. 107.

(20) Federal and State Income and Premium Taxes

The Company was included in the consolidated federal income tax return of its parent company, Aetna and Aetna's other wholly-owned subsidiaries through November 27, 2018 pursuant to the terms of a tax sharing agreement. For the tax period ending December 31, 2018, Aetna and its wholly-owned subsidiaries are included in the consolidated federal income tax return of its parent, CVS Health, pursuant to the terms of a tax sharing agreement (and a Supplemental Tax Sharing Agreement where applicable) between CVS Health and the Company. In accordance with both agreements, the Company's current federal and state income tax provisions are generally computed as if the Company were filing a separate federal and state income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to these agreements, the Company has the enforceable right to recoup federal and state income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal and state income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101 - Income Taxes. DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

- c. The amount of gross DTAs, after the application of paragraphs a. and b. above that can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

The Company is subject to state income taxes. State income tax expense is recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. The Company had no state income tax expense at December 31, 2018 and 2017. The Company had no state income tax payables at December 31, 2018 and 2017. The Company had no state income tax receivables at December 31, 2018 and 2017.

The Company is subject to premium tax. These tax expenses were recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. The Company had no premium tax expense at December 31, 2018 and 2017. The Company had no premium tax payables at December 31, 2017 and 2016. The Company had prepaid premium taxes of \$1,547,453 and \$172,985 at December 31, 2018 and 2017, respectively, were included as an aggregate write-in in the Statutory Statement of Assets.

## (21) Reinsurance

In the normal course of business, the Company seeks to reduce the loss that may arise from catastrophes or other events that cause unfavorable underwriting results and to help balance its risks and capital by reinsuring certain levels of risk with other insurance enterprises. The reinsurance coverage does not relieve the Company of its primary obligations. Reinsurance premiums and reserves related to reinsured business are accounted for on a basis consistent with those used in accounting for the original policies issued and

the terms of the reinsurance contracts. Premiums ceded for medical losses and the related unpaid reserves have been reported as reductions of these items. The reinsurance agreements are more fully discussed in Notes 10 and 23.

D. Going Concern

As of March 1, 2019, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or correction of errors in the years ended December 31, 2018 and 2017.

3. Business Combinations and Goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2018 and 2017.

4. Discontinued Operations

The Company did not have any discontinued operations in the years ending December 31, 2018 and 2017.

5. Investments

A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2018 or 2017.

B. The Company did not have any debt restructuring in the years ending December 31, 2018 and 2017.

C. The Company did not have any reverse mortgages at December 31, 2018 or 2017.

D. Loan-Backed Securities

(1) Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.

(2) The Company did not recognize any other-than-temporary impairments ("OTTI") on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R - *Loan-Backed and Structured Securities* ("SSAP No. 43R") at 2018.

(3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at December 31, 2018.

(4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2018 is as follows:

a. The aggregate amount of unrealized losses:	
1. Less than 12 Months	(79)
2. 12 Months or Longer	—
b. The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 Months	241,226
2. 12 Months or Longer	—



- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at December 31, 2018 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2018.
- (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2018.
- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2018.
- (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2018.
- (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2018.
- (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2018.
- (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.

F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at December 31, 2018.

G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at December 31, 2018.

H. The Company did not have any repurchase agreements transactions accounted for as a sale at December 31, 2018.

I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at December 31, 2018.

J. The Company did not have any real estate at December 31, 2018.

K. The Company did not have any low-income housing tax credits at December 31, 2018.

L. Restricted Assets

- (1) The Company did not have any restricted assets (including pledged) at December 31, 2018.
- (2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2018.
- (3) The Company did not have any other restricted assets at December 31, 2018.
- (4) The Company did not have any collateral received and reflected within its financial statements at December 31, 2018.

M. The Company did not have any working capital finance investments at December 31, 2018.

N. The Company did not have any offsetting and netting of derivative, repurchase and reverse repurchase, and securities borrowing and securities lending assets or liabilities at December 31, 2018.

O. The Company did not have any structured notes at December 31, 2018.

- P. The Company did not have any 5GI\* securities at December 31, 2018.
- Q. The Company did not have any short sales within the reporting period. December 31, 2018.
- R. The Company did not have any prepayment penalty and acceleration fees at December 31, 2018.

6. Joint Ventures, Partnerships, and Limited Liability Companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2018 or 2017.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2018 or 2017.

7. Investment Income

- A. Due and accrued income was excluded from surplus on the following bases:
- Bonds - where collection of interest is uncertain.
- Preferred stock - where collection of dividends is uncertain.
- Mortgage loans - all due and accrued interest on loans delinquent for more than one year and on other loans where collection of interest is uncertain.
- Real estate - where rent is in arrears for more than three months.
- Contract loans - where accrued interest is in excess of loan value.
- B. There was no amount excluded at December 31, 2018 or 2017.

8. Derivative Instruments

The Company did not have any derivative instruments at December 31, 2018 or 2017.

9. Income Taxes

- A.
- (1) The components of the net DTAs recognized in the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus are as follows:

	As of End of Current Period			12/31/2017			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	409,493	147,950	557,443	673,100	70,253	743,353	(263,607)	77,697	(185,910)
(b) Statutory Valuation Allowance Adjustment	—	147,950	147,950	—	—	—	—	147,950	147,950
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	409,493	—	409,493	673,100	70,253	743,353	(263,607)	(70,253)	(333,860)
(d) Deferred Tax Assets Nonadmitted	37,883	—	37,883	58,412	19,008	77,420	(20,529)	(19,008)	(39,537)
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	371,610	—	371,610	614,688	51,245	665,933	(243,078)	(51,245)	(294,323)
(f) Deferred Tax Liabilities	65,375	—	65,375	—	9,460	9,460	65,375	(9,460)	55,915
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	306,235	—	306,235	614,688	41,785	656,473	(308,453)	(41,785)	(350,238)

- (2) The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE AETNA HEALTH OF IOWA INC.

	As of End of Current Period			12/31/2017			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	(Col. 1 + 2) Total	Ordinary	Capital	(Col. 4 + 5) Total	(Col. 1 - 4) Ordinary	(Col. 2 - 5) Capital	(Col. 7 + 8) Total
Admission Calculation Components									
SSAP No. 101									
Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	306,018	—	306,018	568,667	14,051	582,718	(262,649)	(14,051)	(276,700)
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2	217	—	217	46,021	27,734	73,755	(45,804)	(27,734)	(73,538)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	217	—	217	46,021	27,734	73,755	(45,804)	(27,734)	(73,538)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.			5,935,092			5,525,475			409,617
Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	65,375	—	65,375	—	9,460	9,460	65,375	(9,460)	55,915
Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	371,610	—	371,610	614,688	51,245	665,933	(243,078)	(51,245)	(294,323)

(3)

	2018	2017
(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	3,425.000	532.000
(b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	39,567,278	36,836,499

(4) The impact of tax planning strategies is as follows:

	As of End of Current Period		12/31/2017			
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col. 1 - 3) Ordinary	(Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	409,493	—	673,100	70,253	(263,607)	(70,253)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	—	—	—	3.731	—	(3.731)
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	371,609.9	—	614,688	51,245	(243,078.1)	(51,245)
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	—	—	—	4.165	—	(4.165)

(b) Do the Company's tax-planning strategies include the use of reinsurance? Yes [ ] No [ X ]

C. Current income taxes incurred consist of the following major components:

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	(1) As of End of Current Period	(2) 12/31/2017	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	2,016,508	1,910,696	105,812
(b) Foreign			—
(c) Subtotal	2,016,508	1,910,696	105,812
(d) Federal income tax on net capital gains	(143,135)	(4,814)	(138,321)
(e) Utilization of capital loss carry-forwards			—
(f) Other			—
(g) Federal and foreign income taxes incurred	1,873,373	1,905,882	(32,509)
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	21,733	50,864	(29,131)
(2) Unearned premium reserve	1,551	3,057	(1,506)
(3) Policyholder reserves	165,645	9,696	155,949
(4) Investments			—
(5) Deferred acquisition costs			—
(6) Policyholder dividends accrual			—
(7) Fixed Assets	8,767		8,767
(8) Compensation and benefits accrual			—
(9) Pension accrual			—
(10) Receivables - nonadmitted	50,170	393,320	(343,150)
(11) Net operating loss carry-forward			—
(12) Tax credit carry-forward			—
(13) Other (including items <5% of total ordinary tax assets)	161,627	216,163	(54,536)
(99) Subtotal	409,493	673,100	(263,607)
(b) Statutory valuation allowance adjustment			—
(c) Nonadmitted	37,883	58,412	(20,529)
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	371,610	614,688	(243,078)
(e) Capital:			
(1) Investments	147,950	70,253	77,697
(2) Net capital loss carry-forward			—
(3) Real estate			—
(4) Other (including items <5% of total ordinary tax assets)			—
(99) Subtotal	147,950	70,253	77,697
(f) Statutory valuation allowance adjustment	147,950		147,950
(g) Nonadmitted		19,008	(19,008)
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	—	51,245	(51,245)
(i) Admitted deferred tax assets (2d + 2h)	371,609.9	665,933	(294,323.1)
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments	22,377		22,377
(2) Fixed assets			—
(3) Deferred and uncollected premium			—
(4) Policyholder reserves			—
(5) Other (including items <5% of total ordinary tax liabilities)	42,998		42,998
(99) Subtotal	65,375	—	65,375
(b) Capital:			
(1) Investments		9,460	(9,460)
(2) Real estate			—
(3) Other (including items <5% of total capital tax liabilities)			—
(99) Subtotal	—	9,460	(9,460)
(c) Deferred tax liabilities (3a99 + 3b99)	65,375	9,460	55,915
4. Net deferred tax assets/liabilities (2i - 3c)	306,234.9	656,473	(350,238.1)

The change in net deferred income taxes is comprised of the following:

	12/31/2018	12/31/2017	Change
Total Deferred Tax Assets	409,493	743,353	(333,860)
Total Deferred Tax Liabilities	(65,375)	(9,460)	(55,915)
Net Deferred Tax Assets/(Liabilities)	344,118	733,893	(389,775)
Tax Effect of Unrealized Gains/(Losses)			—
Change in Net Deferred Income Tax			(389,775)

The valuation allowance adjustment to gross DTAs was \$147,950 and \$0 for December 31, 2018 and 2017, respectively.

D. The provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	12/31/2018	Effective Tax Rate	12/31/2017	Effective Tax Rate
Provision computed at statutory rate	814,367	21.0%	3,588,159	35.0%
Health Insurer Fee	887,519	22.9%	—	0.0%
Transfer Pricing Adjustment	(80,444)	-2.1%	(1,416,787)	-13.8%
Tax-Exempt Interest	(183,420)	-4.7%	(309,103)	-3.0%
Change in Nonadmitted Assets	343,150	8.9%	(333,768)	-3.3%
Prior Year True-Up	334,025	8.6%	307,012	3.0%
Change in Valuation Allowance Adjustment	147,950	3.8%	(1,118,547)	-10.9%
Expiration of NOL	—	0.0%	—	0.0%
Impact on Deferred Tax for Enacted Rate Change	—	0.0%	489,262.05	4.8%
Other	1	0.0%	(3)	0.0%
Total	2,263,148	58.4%	1,206,225	11.8%
Federal and foreign income taxes incurred	1,873,373	48.3%	1,905,882	18.6%
Change in net deferred income taxes	389,775	10.1%	(699,657)	-6.8%
Total statutory income taxes	2,263,148	58.4%	1,206,225	11.8%

On December 22, 2017, the Tax Cuts and Jobs Act of 2017 (the “TCJA”) was enacted, which among other items, reduces the federal corporate tax rate to 21% effective January 1, 2018. The Company re-measured its deferred income taxes for the year-ended December 31, 2017 and recognized incremental tax expense (benefit) related to the change in its net deferred tax asset/liability. The accounting for income tax effects of the TCJA related to life insurance reserves were provisional at December 31, 2017. Accordingly, the items were recorded at a reasonable estimate at December 31, 2017.

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm’s length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

E.

- (1) At December 31, 2018 and 2017, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
- (2) The amount of federal income taxes incurred that is available for recoupment in the event of future net losses is as follows:

Year	Ordinary	Capital	Total
2018	115,579	0	115,579
2018	1,271,364	0	1,271,364
2017	N/A	0	0
Total	1,386,943	0	1,386,943

- (3) The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2018 and 2017.

F.

- (1) At December 31, 2018, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc.	CVS Health Corporation
@ Credentials Inc.	Accendo Insurance Company
Accordant Common, LLC	Accordant Health Services, LLC
Accuscript MO, Inc.	ACS Acqco Corp.
Active Health Management, Inc.	Adminco, Inc.
Administrative Enterprises, Inc.	Advanced Care Scripts, Inc.
Advanced Healthcare Distributors, LLC	AdvancePCS Specialty Rx, LLC
ADVANCERX.COM, LLC	Aetna Asset Advisors, LLC
Aetna Behavioral Health, LLC	Aetna Better Health Inc. (Georgia)
Aetna Better Health Inc. (IL)	Aetna Better Health Inc. (NJ)
Aetna Better Health Inc. (NY)	Aetna Better Health Inc. (OH)

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Aetna Better Health Inc. (Tennessee)	Aetna Better Health of California, Inc.
Aetna Better Health of Iowa, Inc.	Aetna Better Health of Kansas Inc.
Aetna Better Health of Kentucky Insurance Co.	Aetna Better Health of Michigan, Inc.
Aetna Better Health of Missouri LLC	Aetna Better Health of Nevada Inc.
Aetna Better Health of North Carolina, Inc.	Aetna Better Health of Oklahoma Inc.
Aetna Better Health of Texas, Inc.	Aetna Better Health of Washington, Inc.
Aetna Better Health, Inc. (Connecticut)	Aetna Better Health, Inc. (LA)
Aetna Better Health, Inc. (PA)	Aetna Capital Management, LLC
Aetna Card Solutions, LLC	Aetna Dental Inc. (New Jersey)
Aetna Dental Inc. (Texas)	Aetna Dental of California, Inc.
Aetna Financial Holdings, LLC	Aetna Florida, Inc.
Aetna Health Holdings, LLC	Aetna Health Inc. (Connecticut)
Aetna Health Inc. (Florida)	Aetna Health Inc. (Georgia)
Aetna Health Inc. (LA)	Aetna Health Inc. (Maine)
Aetna Health Inc. (Michigan)	Aetna Health Inc. (New Jersey)
Aetna Health Inc. (NY)	Aetna Health Inc. (Pennsylvania)
Aetna Health Inc. (Texas)	Aetna Health Insurance Company
Aetna Health Insurance Company of New York	Aetna Health Management, LLC
Aetna Health of California Inc.	Aetna Health of Iowa, Inc
Aetna Health of Utah, Inc.	Aetna HealthAssurance Pennsylvania, Inc.
Aetna Integrated Informatics, Inc.	Aetna International Inc.
Aetna Ireland Inc.	Aetna Life & Casualty (Bermuda) Limited
Aetna Medicaid Administrators LLC	Aetna Network Services LLC
Aetna Pharmacy Management Services, LLC	Aetna Risk Assurance Company of Connecticut
Aetna Rx Home Delivery, LLC	Aetna Specialty Pharmacy, LLC
Aetna Student Health Agency, Inc.	Aetna Workers' Comp Access, LLC
Alabama CVS Pharmacy, LLC	Alajasper Realty Services, LLC
Alaska CVS Pharmacy, LLC	Allviant Corporation
AMC - New York, Inc.	AMC - Tennessee, Inc.
American Drug Stores Delaware, LLC	American Health Holding, Inc.
Apria Finance Holdings, Inc.	APS Acquisition LLC
APS-Summit Care Pharmacy, LLC	Arizona CVS Stores, LLC
Arkansas CVS Pharmacy, LLC	ASCO Healthcare of New England Limited Partnership
ASCO HealthCare, LLC	ASI Wings, LLC
AUSHC Holdings, Inc. (CT)	Badger Acquisition LLC
Badger Acquisition of Kentucky, LLC	Badger Acquisition of Minnesota, LLC
Badger Acquisition of Ohio, LLC	Baumel Eisner Neuromedical Institute, LLC
Best Care LTC Acquisition Company, LLC	Bluegrass Pharmacy of Lexington, LLC
BPNY Acquisition Corp	Bruin Acquisition Co., Inc.
bswift, LLC	Busse CVS, LLC #3110
Campo's Medical Pharmacy, Inc.	Care Pharmaceutical Services, LP
Care4, LP	Carecenter Pharmacy, LLC
Carecenter Pharmacy, LLC	Carefree Insurance Services, Inc.
Caremark Arizona Specialty Pharmacy Holding, LLC	Caremark Arizona Specialty Pharmacy, LLC
Caremark California Specialty Pharmacy Holding, LLC	Caremark California Specialty Pharmacy, LLC
Caremark Dallas Pharmacy, LLC	Caremark Hawaii Mail Pharmacy Holding, LLC
Caremark Hawaii Mail Pharmacy, LLC	Caremark Illinois Mail Pharmacy Holding, LLC
Caremark Irving Resource Center Holding, LLC	Caremark Irving Resource Center, LLC
Caremark Ohio Specialty Pharmacy Holding, LLC	Caremark Ohio Specialty Pharmacy, LLC
Caremark PA Specialty Pharmacy Holding, LLC	Caremark PCS, LLC
Caremark Pennsylvania Specialty Pharmacy, LLC	Caremark PHC, LLC
Caremark Puerto Rico Holding, LLC	Caremark Puerto Rico Specialty Pharmacy Holding, LLC
Caremark Puerto Rico Specialty Pharmacy, LLC	Caremark Puerto Rico, LLC
Caremark Redlands Pharmacy, LLC	Caremark Rx, LLC
Caremark Texas Mail Pharmacy Holding, LLC	Caremark Texas Mail Pharmacy, LLC
Caremark Ulysses Holding Corp.	Caremark, LLC
CaremarkPCS Alabama Mail Pharmacy Holding, LLC	CaremarkPCS Alabama Mail Pharmacy, LLC
CaremarkPCS Health, LLC	CaremarkPCS Pennsylvania Mail Pharmacy Holding, LLC
CaremarkPCS Pennsylvania Mail Pharmacy, LLC	CC Advertising & Marketing, LLC
CCRx Holdings, LLC	CCRx of North Carolina Holdings, LLC
CCRx of North Carolina, LLC	Central Rx Services, LLC
Choice Source Therapeutic Of Houston, Texas, LLC	Choice Source, LLC
CHP Acquisition Corp.	Circle Tallahassee Re, LLC

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Claims Administration Corporation	Cofinity, Inc.
Compass Health Services, LLC	CompScript, LLC
Connecticut CVS Pharmacy, LLC	Continuing Care RX, LLC
Coram Alternate Site Services, Inc.	Coram Clinical Trials, Inc.
Coram Healthcare Corporation of Alabama	Coram Healthcare Corporation Of Florida
Coram Healthcare Corporation Of Greater D.C.	Coram Healthcare Corporation of Greater New York
Coram Healthcare Corporation of Indiana	Coram Healthcare Corporation of Massachusetts
Coram Healthcare Corporation of Mississippi	Coram Healthcare Corporation of Nevada
Coram Healthcare Corporation of North Texas	Coram Healthcare Corporation of Northern California
Coram Healthcare Corporation of Southern California	Coram Healthcare Corporation Of Southern Florida
Coram Healthcare Corporation of Utah	Coram LLC
Coram Specialty Infusion Services, LLC	CoramRX, LLC
Corporate Benefit Strategies, Inc.	Coventry Consumer Advantage, Inc.
Coventry Health and Life Insurance Company	Coventry Health Care National Accounts, Inc.
Coventry Health Care National Network, Inc.	Coventry Health Care of Florida, Inc.
Coventry Health Care of Illinois, Inc.	Coventry Health Care of Kansas, Inc.
Coventry Health Care of Missouri, Inc.	Coventry Health Care of Nebraska, Inc.
Coventry Health Care of Virginia, Inc.	Coventry Health Care of West Virginia, Inc.
Coventry Health Care Workers Compensation, Inc.	Coventry Health Plan of Florida, Inc.
Coventry HealthCare Management Corporation	Coventry Prescription Management Services, Inc.
Coventry Rehabilitation Services, Inc.	Coventry Transplant Network, Inc.
CP Acquisition Corp.	CP Services LLC
CSR, Inc.	CVS 1001 MA, LLC
CVS 10015 MA, LLC	CVS 10019 AR, LLC
CVS 10024 VA, LLC	CVS 10049 KY, LLC
CVS 10078 FL, LLC	CVS 10099 DE, LLC
CVS 10117 VA, LLC	CVS 10125 MA, LLC
CVS 10154 GA, LLC	CVS 10170 VA, LLC
CVS 10175 OK, LLC	CVS 10196 MA, LLC
CVS 10201 MN, LLC	CVS 10206 AL, LLC
CVS 10208 AL, LLC	CVS 10238 DE, LLC
CVS 10242 NE, LLC	CVS 10251 VA, LLC
CVS 10273 OK, LLC	CVS 10275 OK, LLC
CVS 10279 KY, LLC	CVS 10286 VA, LLC
CVS 10320 VA, LLC	CVS 10326 OK, LLC
CVS 10346 FL, LLC	CVS 10374 OH, LLC
CVS 10376 DE, LLC	CVS 10396 MN, LLC
CVS 1041 MA, LLC	CVS 10410 NE, LLC
CVS 10419 WI, LLC	CVS 10422 VA, LLC
CVS 10430 AR, LLC	CVS 10432 AR, LLC
CVS 10453 VA, LLC	CVS 10454 VA, LLC
CVS 10501 MA, LLC	CVS 10504 FL, LLC
CVS 10515 TN, LLC	CVS 10518 AR, LLC
CVS 10533 WI, LLC	CVS 10534 AR, LLC
CVS 10539 AR, LLC	CVS 10560 OK, LLC
CVS 10563 VA, LLC	CVS 10586 VA, LLC
CVS 10589 GA, LLC	CVS 10644 FL, LLC
CVS 10666 AR, LLC	CVS 10683 KY, LLC
CVS 10684 VA, LLC	CVS 10746 VA, LLC
CVS 10756 MN, LLC	CVS 10768 VA, LLC
CVS 10770 VA, LLC	CVS 10779 AR, LLC
CVS 10781 CO, LLC	CVS 10782 CO, LLC
CVS 10783 CO, LLC	CVS 10784 CO, LLC
CVS 10785 CO, LLC	CVS 10787 SC, LLC
CVS 10788 KY, LLC	CVS 1079 GA, LLC
CVS 10811 AL, LLC	CVS 10812 KY, LLC
CVS 10816 AR, LLC	CVS 10830 CO, LLC
CVS 10831 CO, LLC	CVS 10836 MA, LLC
CVS 10893 OH, LLC	CVS 10898 AL, LLC
CVS 10937 VA, LLC	CVS 10949 TN, LLC
CVS 10958 CO, LLC	CVS 10967 VA, LLC
CVS 10968 VA, LLC	CVS 10975 AR, LLC
CVS 10976 OK, LLC	CVS 10990 VA, LLC

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CVS 10992 VA, LLC	CVS 11000 CO, LLC
CVS 11001 CO, LLC	CVS 11002 CO, LLC
CVS 11016 AL, LLC	CVS 11017 GA, LLC
CVS 11019 KY, LLC	CVS 11024 CO, LLC
CVS 11056 VA, LLC	CVS 11070 MN, LLC
CVS 11083 VA, LLC	CVS 11086 OH, LLC
CVS 11089 KY, LLC	CVS 11092 OK, LLC
CVS 11093 AR, LLC	CVS 11104 CO, LLC
CVS 11105 CO, LLC	CVS 11115 VA, LLC
CVS 11155 OH, LLC	CVS 11158 AR, LLC
CVS 11179 VA, LLC	CVS 11233 VA, LLC
CVS 1126 FL, LLC	CVS 1131 MA, LLC
CVS 11337 CO, LLC	CVS 1194 SC, LLC
CVS 1200 SC, LLC	CVS 1383 VA, LLC
CVS 1420 GA, LLC	CVS 1427, LLC
CVS 1435 MD, LLC	CVS 1452 MD, LLC
CVS 1461 MD, LLC	CVS 1525 VA, LLC
CVS 1538 VA, LLC	CVS 1547 VA, LLC
CVS 1556 VA, LLC	CVS 1561 VA, LLC
CVS 1589 MI, LLC	CVS 1743 AZ, LLC
CVS 180 SC, LLC	CVS 1803 MA, LLC
CVS 2003 VA, LLC	CVS 2004 VA, LLC
CVS 2019 VA, LLC	CVS 2048 RI, LLC
CVS 2065 RI, LLC	CVS 2212 GA, LLC
CVS 2545 CT, LLC	CVS 264 NJ, LLC
CVS 2747 FL, LLC	CVS 2776 VA, LLC
CVS 2829 FL, LLC	CVS 2948 Henderson, LLC #2948
CVS 301 MA, LLC	CVS 3042 DE, LLC
CVS 3121 FL, LLC	CVS 3186 WV, LLC
CVS 3227 FL, LLC	CVS 3232 NC, LLC
CVS 3250 FL, LLC	CVS 3257 FL, LLC
CVS 326 RI, LLC	CVS 3268 Gilbert, LLC #3268
CVS 3269 FL, LLC	CVS 3271 FL, LLC
CVS 3301 OH, LLC	CVS 3318 FL, LLC
CVS 3320 OH, LLC	CVS 3343 OH, LLC
CVS 3353 OH, LLC	CVS 3356 OH, LLC
CVS 3380 SC, LLC	CVS 3407 OH, LLC
CVS 3416 OH, LLC	CVS 3418 FL, LLC
CVS 3432 OH, LLC	CVS 3452 OH, LLC
CVS 3460 VA, LLC	CVS 3468 OH, LLC
CVS 3471 OH, LLC	CVS 3537 SC, LLC
CVS 3558 NV, LLC	CVS 3563 NC, LLC
CVS 3625 AZ, LLC	CVS 3667 FL, LLC
CVS 373 MA, LLC	CVS 3745 Peoria, LLC #3745
CVS 3749 AZ, LLC	CVS 3805 SC, LLC
CVS 3818 FL, LLC	CVS 3831 NC, LLC
CVS 3833 NC, LLC	CVS 3923 FL, LLC
CVS 3965 AZ, LLC	CVS 3967 AZ, LLC
CVS 397 RI, LLC	CVS 3973 NC, LLC
CVS 3987 NC, LLC	CVS 3988 NC, LLC
CVS 4015 FL, LLC	CVS 4016 MA, LLC
CVS 4073 MA, LLC	CVS 410 FL, LLC
CVS 4110 TN, LLC	CVS 4153 SC, LLC
CVS 4225 MD, LLC	CVS 4300 OH, LLC
CVS 433 MA, LLC	CVS 4331 OH, LLC
CVS 4380 WI, LLC	CVS 4419 WV, LLC
CVS 4480 FL, LLC	CVS 4485 FL, LLC
CVS 449 MA, LLC	CVS 4519 MS, LLC
CVS 4523 SC, LLC	CVS 4533 TN, LLC
CVS 4536 MS, LLC	CVS 4544 RI, LLC (f/k/a CVS 75566 RI, LLC)
CVS 4639 FL, LLC	CVS 4669 GA, LLC
CVS 4672 GA, LLC	CVS 4695 GA, LLC
CVS 4738 FL, LLC (f/k/a CVS 75462 FL, LLC)	CVS 4769 SC, LLC



CVS 4795 AZ, LLC	CVS 4832 AL, LLC
CVS 4840 AL, LLC	CVS 4853 AL, LLC
CVS 4896 OK, LLC	CVS 4900 AL, LLC
CVS 4905 AL, LLC	CVS 4944 AL, LLC
CVS 4976 AL, LLC	CVS 4981 MA, LLC
CVS 4993 MS, LLC	CVS 5018 TN, LLC
CVS 5021 VA, LLC	CVS 5029 AZ, LLC
CVS 5089 NY, LLC	CVS 5111 FL, LLC
CVS 5112 FL, LLC	CVS 5113 NV, LLC
CVS 5131 AZ, LLC	CVS 516 VA, LLC
CVS 5165 FL, LLC	CVS 5168 MS, LLC
CVS 5180 FL, LLC	CVS 5271 KS, LLC
CVS 5282 LA, LLC	CVS 5354 LA, LLC
CVS 5374 LA, LLC	CVS 5375 FL, LLC
CVS 5382 IL, LLC	CVS 5419 SC, LLC
CVS 5432 LA, LLC	CVS 5448 FL, LLC
CVS 5467 VA, LLC	CVS 5469 LA, LLC
CVS 5492 MN, LLC	CVS 5523 GA, LLC
CVS 5537 NC, LLC	CVS 5542 SC, LLC
CVS 5545 NC, LLC	CVS 5552 SC, LLC
CVS 5568 NC, LLC	CVS 5577 NC, LLC
CVS 5585 NC, LLC	CVS 5589 FL, LLC
CVS 5595 NC, LLC	CVS 5616 MN, LLC
CVS 5622 GA, LLC	CVS 5625 MO, LLC
CVS 5680 GA, LLC	CVS 5683 GA, LLC
CVS 5740 MS, LLC	CVS 5779 AZ, LLC
CVS 5783 IL, LLC	CVS 5791 AZ, LLC
CVS 5793 AZ, LLC	CVS 5801 MS, LLC
CVS 5812 AZ, LLC	CVS 5815 FL, LLC
CVS 5816 FL, LLC	CVS 582 MA, LLC
CVS 5828 CA, LLC	CVS 5829 IL, LLC
CVS 5849 AZ, LLC	CVS 5850 MS, LLC
CVS 5851 IL, LLC	CVS 5856 MA, LLC
CVS 5890 AZ, LLC	CVS 5891 AZ, LLC
CVS 5892 AZ, LLC	CVS 5893 AZ, LLC
CVS 590 RI, LLC	CVS 5931 AZ, LLC
CVS 5934 AZ, LLC	CVS 6009 OK, LLC
CVS 6012 GA, LLC	CVS 6073 NJ, LLC
CVS 6089 OH, LLC	CVS 6116 KY, LLC
CVS 612 MA, LLC	CVS 6135 NJ, LLC
CVS 6142 OK, LLC	CVS 6201 MN, LLC
CVS 6233 OK, LLC	CVS 6304 TN, LLC
CVS 6305 WV, LLC	CVS 6306 WV, LLC
CVS 6342 KY, LLC	CVS 6349 OH, LLC
CVS 6363 TN, LLC	CVS 6384 KY, LLC
CVS 6395 TN, LLC	CVS 6413 TN, LLC
CVS 6423, LLC	CVS 6429 TN, LLC
CVS 6572 IN. II, LLC	CVS 6572 IN., LLC
CVS 6796 MA, LLC	CVS 6852 VA, LLC
CVS 6867 NV, LLC	CVS 6869 DE, LLC
CVS 6874 IN, LLC	CVS 6941 KY, LLC
CVS 6972 FL, LLC	CVS 7036, LLC
CVS 7047, LLC	CVS 7057 NC, LLC
CVS 7070 MS, LLC	CVS 709 FL, LLC
CVS 7109 MA, LLC	CVS 7133 FL, LLC
CVS 7148 NC, LLC	CVS 7157 NC, LLC
CVS 7173 FL, LLC	CVS 7180 AL, LLC
CVS 7200, LLC	CVS 7215 AL, LLC
CVS 7382 NC, LLC	CVS 75024 AL, LLC
CVS 75121 SC, LLC	CVS 75124 MI, LLC
CVS 75129 FL, LLC	CVS 75137 MD, LLC
CVS 75139 NJ, LLC	CVS 75144 RI, LLC
CVS 75151 OH, LLC	CVS 75156 NV, LLC

CVS 75157 MI, LLC	CVS 75160 SC, LLC
CVS 75161 AZ, LLC	CVS 75162 AZ, LLC
CVS 75163 GA, LLC	CVS 75165 GA, LLC
CVS 7519 MN, LLC	CVS 75195 FL, LLC
CVS 75235 RI, LLC	CVS 75249 FL, LLC
CVS 75257 NJ, LLC	CVS 75269 MI, LLC
CVS 75275 TN, LLC	CVS 75280 NC, LLC
CVS 75294 FL, LLC	CVS 75307 KS, LLC
CVS 75312 VA, LLC	CVS 75334 FL, LLC
CVS 75363 GA, LLC	CVS 75365 GA, LLC
CVS 75374 NJ, LLC	CVS 75377 NC, LLC
CVS 75380 GA, LLC	CVS 75393 DE, LLC
CVS 75408 FL, LLC	CVS 75416 KY, LLC
CVS 75441 GA, LLC	CVS 75444 NV, LLC
CVS 75461 AL, LLC	CVS 75485 NC, LLC
CVS 75486 KS, LLC	CVS 75503 GA, LLC
CVS 75536 GA, LLC	CVS 75558 FL, LLC
CVS 75560 NJ, LLC	CVS 75561 NJ, LLC
CVS 75562 VA, LLC	CVS 75563 MD, LLC
CVS 75569 GA, LLC	CVS 75572 NC, LLC
CVS 75583 MA, LLC	CVS 75584 MA, LLC
CVS 75590 MN, LLC	CVS 75615 FL, LLC
CVS 75619 NJ, LLC	CVS 75626 GA, LLC
CVS 75636 NV, LLC	CVS 75642 VA, LLC
CVS 75651 SC, LLC	CVS 75659 OK, LLC
CVS 75660 OK, LLC	CVS 75669 MA, LLC
CVS 75676 KY, LLC	CVS 75679 SC, LLC
CVS 75707 FL, LLC	CVS 75718 OH, LLC
CVS 75719 MN, LLC	CVS 75733 NV, LLC
CVS 75738 RI, LLC	CVS 75740 NJ, LLC
CVS 75743 NJ, LLC	CVS 75770 NC, LLC
CVS 75771 NC, LLC	CVS 75774 MA, LLC
CVS 75795 DE, LLC	CVS 75799 NJ, LLC
CVS 75849 NC, LLC	CVS 75896 MA, LLC
CVS 75905 NJ, LLC	CVS 75924 FL, LLC
CVS 75935 NV, LLC	CVS 75946 VA, LLC
CVS 75947 GA, LLC	CVS 75952 WI, LLC
CVS 75958 MN, LLC	CVS 75959 MN, LLC
CVS 75961 SC, LLC	CVS 75977 MN, LLC
CVS 75978 FL, LLC	CVS 75995 DE, LLC
CVS 7648 KY, LLC	CVS 770 FL, LLC
CVS 7701, LLC	CVS 7885 GA, LLC
CVS 7888 GA, LLC	CVS 8003 MI, LLC
CVS 8009 MI, LLC	CVS 8067 MI, LLC
CVS 8071 MI, LLC	CVS 8078 MI, LLC
CVS 8086 MI, LLC	CVS 8103 MI, LLC
CVS 8123 MI, LLC	CVS 8133 MI, LLC
CVS 8165 MI, LLC	CVS 8207 MI, LLC
CVS 8281 MD, LLC	CVS 8302 MI, LLC
CVS 8303 TN, LLC	CVS 8415 NE, LLC
CVS 8549 MI, LLC	CVS 8615 NE, LLC
CVS 866 FL, LLC	CVS 8774 WI, LLC
CVS 8776 WI, LLC	CVS 8909 NC, LLC
CVS 8956 MS, LLC	CVS 8975 SC, LLC
CVS 8993 MS, LLC	CVS 920 MA, LLC
CVS 921 IL, LLC	CVS 932 FL, LLC
CVS 962 GA, LLC	CVS 9674 CA, LLC
CVS 976 FL, LLC	CVS AL Distribution, LLC
CVS ALBANY, LLC	CVS AOC Services, LLC
CVS ARCLIGHT, INC.	CVS Bay City 8207 MI, LLC
CVS Bellmore Avenue, LLC #2154	CVS Caremark Advanced Technology Pharmacy, LLC
CVS Caremark Indemnity Ltd.	CVS Caremark Part D Services, LLC
CVS Durham 7042, LLC	CVS EGL 5624 MO, LLC

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CVS EGL 571 FL, LLC	CVS EGL 7958 FL, LLC
CVS ETB Holding Company, LLC	CVS Falmouth KY, LLC
CVS Foreign, Inc. #9736	CVS Gilbert 3272, LLC #3272
CVS Grand Bay 4782, LLC	CVS Greensboro, LLC
CVS Indiana, LLC #0877	CVS International, LLC
CVS Lagrange 4540, LLC	CVS Logan 3454, LLC
CVS Manchester NH, LLC #0200	CVS Michigan, LLC #9415
CVS Montgomery 6094, LLC	CVS NV Holding Company, LLC
CVS Orlando FL Distribution, LLC	CVS PA Distribution, LLC
CVS Pharmacy Inc.	CVS PR Center Inc.
CVS PR Center, Inc.	CVS PR Holding Company, LLC
CVS RCI, LLC	CVS RS Arizona, LLC
CVS Rx Services, Inc. #0886	CVS Safir Sourcing, LLC
CVS SC Distribution, LLC	CVS SP 5897 FL, LLC
CVS State Capital, LLC #0800	CVS TN Distribution, LLC
CVS Transportation, LLC	CVS TX Holding Company, LLC
CVS Vero FL Distribution, LLC	CVS Washington 6448, LLC
CVS Weymouth 1853, LLC	CVS WWRE, INC.
D&R Pharmaceutical Services, LLC	D.A.W., LLC
Delaware CVS Pharmacy, LLC	Delaware Physicians Care, Inc.
DG Danville KY, LLC	Digital EHealth, LLC
Digital Enterprise Realty, LLC	District Of Columbia CVS Pharmacy, LLC
E.T.B., INC.	Echo Merger Sub, Inc
Eckerd Corporation Of FL, Inc.	Employee Assistance Services, LLC
Enloe Drugs, LLC	Enterprise Safety Organization, LLC
Escalante Solutions, Llc	Evergreen Pharmaceutical of California, Inc.
Evergreen Pharmaceutical, LLC	Express Pharmacy Services of PA, LLC
First Health Group Corp.	First Health Life and Health Insurance Company
First Script Network Services, Inc.	Florida Health Plan Administrators, LLC
FOCUS Healthcare Management, Inc.	Garfield Beach CVS, LLC
Generation Health, LLC	Geneva Woods Health Services, LLC
Geneva Woods LTC Pharmacy, LLC	Geneva Woods Management, LLC
Geneva Woods Pharmacy Alaska, LLC	Geneva Woods Pharmacy Washington, LLC
Geneva Woods Pharmacy Wyoming, LLC	Geneva Woods Pharmacy, Inc.
Geneva Woods Retail Pharmacy, LLC	Georgia CVS Pharmacy, LLC
German Dobson CVS, LLC #5038	Goodyear CVS, LLC #3749
Grand St. Paul CVS, LLC	Grandview Pharmacy, LLC
Group Dental Service of Maryland, Inc.	Group Dental Service, Inc.
HCP Acquisition Sub, LLC	Health and Human Resource Center, Inc.
Health Data & Managment Solutions, Inc.	Health Re, Inc.
Healthagen LLC	HealthAssurance Pennsylvania, Inc.
Highland Park CVS, LLC	Holiday CVS, LLC
Home Care Pharmacy, LLC	Home Pharmacy Services, LLC
Hook-Superx, LLC	Horizon Behavioral Services, LLC
Idaho CVS Pharmacy, LLC	Institutional Health Care Services, LLC
Interlock Pharmacy Systems, LLC	Iowa CVS Pharmacy, LLC
Ironbound CVS Urban Renewal, LLC	iTriage, LLC
JEC Funding, Inc.	JHC Acquisition, LLC
Kansas CVS Pharmacy, LLC	Kentucky CVS Pharmacy, LLC
Langsam Health Services, LLC	LCPS Acquisition, LLC
LHS Acquisition Sub, LLC	Lobos Acquisition, LLC
Lo-Med Prescription Services, LLC	Longs Drug Stores California, LLC
Longs Drug Stores, LLC	Louisiana CVS Pharmacy, LLC
Managed Care Coordinators, Inc.	Managed Healthcare, Inc.
Martin Health Services, Inc.	Maryland CVS Pharmacy, LLC
Massachusetts CVS Pharmacy, Inc.	Med World Acquisition Corp.
Medical Arts Health Care, Inc.	Melville Realty Co., Inc.
Member Health, LLC	Mental Health Associates, Inc.
Mental Health Network of New York IPA, Inc.	Meritain Health, Inc.
Merwin IV & Specialty Pharmacy, LLC	Merwin Long Term Care, Inc.
Merwin Rx-Compounding Pharmacy, LLC	MetraComp, Inc.
MHHP Acquisition Company, LLC	MHNet Life and Health Insurance Company
MHNet of Florida, Inc.	MHNet Specialty Services LLC

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Minuteclinic Diagnostic Of Alabama, LLC	Minuteclinic Diagnostic Of Arizona, LLC
Minuteclinic Diagnostic Of Florida, LLC	Minuteclinic Diagnostic Of Georgia, LLC
Minuteclinic Diagnostic Of Hawaii, LLC	Minuteclinic Diagnostic Of Illinois, LLC
Minuteclinic Diagnostic Of Kentucky, LLC	Minuteclinic Diagnostic Of Louisiana, LLC
Minuteclinic Diagnostic Of Maine, LLC	Minuteclinic Diagnostic Of Maryland, LLC
Minuteclinic Diagnostic Of Massachusetts, LLC	Minuteclinic Diagnostic Of Nebraska, LLC
Minuteclinic Diagnostic Of New Hampshire, LLC	Minuteclinic Diagnostic Of New Mexico, LLC
Minuteclinic Diagnostic Of Ohio, LLC	Minuteclinic Diagnostic Of Oklahoma, LLC
Minuteclinic Diagnostic Of Oregon, LLC	Minuteclinic Diagnostic Of Pennsylvania, LLC
Minuteclinic Diagnostic Of Rhode Island, LLC	Minuteclinic Diagnostic Of South Carolina, LLC
Minuteclinic Diagnostic Of Texas, LLC	Minuteclinic Diagnostic Of Utah, LLC
Minuteclinic Diagnostic Of Virginia, LLC	Minuteclinic Diagnostic Of Washington, LLC
Minuteclinic Diagnostic Of Wisconsin, LLC	Minuteclinic Online Diagnostic Services, LLC
Minuteclinic Telehealth Services, LLC	Minuteclinic, LLC
Mississippi CVS Pharmacy, LLC	Missouri CVS Pharmacy, LLC
Montana CVS Pharmacy, LLC	Mountain Grove Investment Group LLC
NCS Healthcare of Illinois, LLC	NCS Healthcare of Indiana LLC
NCS Healthcare of Iowa, LLC	NCS Healthcare of Kansas, LLC
NCS Healthcare of Kentucky, Inc.	NCS Healthcare of Montana, Inc.
NCS Healthcare of New Hampshire, Inc.	NCS Healthcare of New Mexico, Inc.
NCS Healthcare of Ohio, LLC	NCS Healthcare of South Carolina, Inc.
NCS Healthcare of Tennessee, Inc.	NCS Healthcare of Wisconsin, LLC
NCS Healthcare, LLC	NCSH Acquisition Sub, LLC
Nebraska CVS Pharmacy, LLC	NeighborCare Holdings, Inc.
NeighborCare of Indiana, LLC	NeighborCare of New Hampshire, LLC
NeighborCare of Virginia, LLC	NeighborCare Pharmacies, LLC
NeighborCare Pharmacy of Virginia, LLC	NeighborCare Pharmacy Services, Inc.
NeighborCare Services Corporation	NeighborCare, Inc.
Nevada CVS Pharmacy, LLC	New Jersey CVS Pharmacy, LLC
NH Acquisition Sub, LLC	Niagara Re, Inc.
NIV Acquisition, LLC	North Carolina CVS Pharmacy, LLC
North Shore Pharmacy Services LLC	Novologix, LLC
NS Acquisition Sub, LLC	NSPS Acquisition Sub, LLC
Ocean Acquisition Sub, LLC	OCR Services Corporation
OCR-RA Acquisition, LLC	Ohio CVS Stores, LLC
Oklahoma CVS Pharmacy, LLC	Omnicare Distribution Center LLC
Omnicare ESC LLC	Omnicare Foundation
Omnicare Headquarters LLC	Omnicare Holding Company
Omnicare Indiana Partnership Holding Company LLC	Omnicare of Nevada, LLC
Omnicare of New York, LLC	Omnicare Pharmacies of Pennsylvania East LLC
Omnicare Pharmacies of Pennsylvania West LLC	Omnicare Pharmacies of the Great Plains Holding Company
Omnicare Pharmacy and Supply Services LLC	Omnicare Pharmacy of Florida, LP
Omnicare Pharmacy of Maine LLC	Omnicare Pharmacy of Nebraska, LLC
Omnicare Pharmacy of North Carolina, LLC	Omnicare Pharmacy of Pueblo, LLC
Omnicare Pharmacy of Tennessee, LLC	Omnicare Pharmacy of Texas 1, LP
Omnicare Pharmacy of Texas 2, LP	Omnicare Pharmacy of the Midwest, LLC
Omnicare Property Management, LLC	Omnicare, Inc.
OPGP Acquisition Sub, LLC	OPM Acquisition Sub, LLC
Oregon CVS Pharmacy, LLC	Part D Holding Co., LLC
PayFlex Holdings, Inc.	PayFlex Systems USA, Inc.
Pennsylvania CVS Pharmacy, LLC	Pennsylvania Life Insurance Company
Performax, Inc.	Pharmacare Holding Company
Pharmacare Pharmacy, LLC	Pharmacare Specialty Healthcare Distributors, LLC
Pharmacy Associates of Glens Falls, Inc.	Pharmacy Consultants, LLC
Pharmacy Holding #1, LLC	Pharmacy Holding #2, LLC
PharmaSource Healthcare, Inc.	Pharm-Corp of Maine LLC
Pharmed Holdings, Inc.	Pharmore, Inc.
Phoenix Data Solutions LLC	PMRP Acquisition Company, LLC
PP Acquisition Company, LLC	Precision Benefit Services, Inc.
PrimeNet, Inc.	PRN Pharmaceutical Services, LP
Procare 4268 Yankee, LLC	Procare Pharmacy Direct, LLC
Procare Pharmacy, LLC	Prodigy Health Group, Inc.
Professional Pharmacy Services, Inc.	Professional Risk Management, Inc.

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PSI Arkansas Acquisition, LLC	Puerto Rico CVS Pharmacy, LLC
Red Oak Sourcing, LLC	Resources for Living, LLC
Retrac, Inc. #107	Rhode Island CVS Pharmacy, LLC
Richmond Heights Acquisition Corp.	Roeschen's Healthcare LLC
Rx Innovations 4439, LLC	RxAMERICA, LLC
RXC Acquisition Company	Schaller Anderson Medical Administrators Inc
Scrip World, LLC	Sheffield Avenue CVS, LLC #3690
Shore Pharmaceutical Providers, LLC	Silverscript Insurance Company
Sky Acquisition LLC	South Carolina CVS Pharmacy, LLC
South Wabash CVS, LLC #3674	Specialized Pharmacy Services, LLC
Specialty Services Holding LLC	Speedwell CVS Urban Renewal, LLC
Sterling Healthcare Services, Inc.	Strategic Resource Company
Suburban Medical Services, LLC	Superior Care Pharmacy, Inc.
T2 Medical, Inc.	TCPI Acquisition Corp.
Tennessee CVs Pharmacy, LLC	The Vasquez Group, Inc.
Thomas Phoenix CVS, LLC #3625	Three Forks Apothecary, LLC
Thundermist Services, LLC	U.S. Health Care Properties, Inc.
UAC Holding, Inc.	UC Acquisition Corp.
Uni-Care Health Services of Maine, Inc.	Utah CVS Pharmacy, LLC
Value Health Care Services LLC	VAPS Acquisition Company, LLC
Vermont CVS Pharmacy, LLC	VHCS Acquisition Sub, LLC
Virginia CVS Pharmacy, LLC	Warm Springs Road CVS, LLC #2928
Washington CVS Pharmacy, LLC	Washington Lamb CVS, LLC #3172
Weber Medical Systems LLC	Wellpartner, LLC
West Virginia CVS Pharmacy, LLC	Westhaven Services Co, LLC
Williamson Drug Company, Incorporated	Wisconsin CVS Pharmacy, LLC
Woodruff Realty Associates, LLC #2085	Woodward Detroit CVS, LLC
Work & Family Benefits, Inc.	WP Smart Holdings, LLC
ZS Acquisition Company, LLC	976 Miami RE, LLC

- (1) At December 31, 2018, the Company's Federal Income Tax Return was consolidated with the following entities:
- (2) As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.

G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information Concerning Parent, Subsidiaries, Affiliates, and Other Related Parties

A., B. and C.

The Company did not pay any dividends in 2018 or 2017.

The Company did not receive any capital contributions in 2018 or 2017.

D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets and Liabilities, Capital and Surplus and Other Funds include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Health Management, LLC ("AHM"), indirectly a wholly-owned subsidiary of Aetna.

At December 31, 2018 and 2017, the Company had the following amounts due to and due from affiliates, which exclude amounts related to pharmacy rebate transactions as discussed more fully in Note 28 and the Company's reinsurance agreement:

	December 31	
	2018	2017
Amounts due to affiliates		
Aetna Health Management, Inc.	687,891	980,656
Coventry Health and Life Insurance Company	93,944	161,548
Coventry Prescription Management Service	9,106	—
	<u>790,941</u>	<u>1,142,204</u>

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

- E. At December 31, 2018, the Company has a guarantor agreement with Aetna. The agreement provides that in the event of the Company's insolvency, Aetna will pay all expenses and claims incurred by the Company during insolvency pursuant to the obligation with employer groups and subscribers until the end of the subscription contract period for which premiums have been received.
- F. As of and for the years ended December 31, 2018 and 2017, the Company had the following significant transactions with affiliates:

The Company and AHM are parties to an administrative services agreement, under which AHM provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits a percentage of its earned commercial, Medicaid and Medicare premium revenue, as applicable, to AHM as a fee, subject to an annual true-up mechanism as defined in the agreement. Under the agreement, this true-up is due to be settled with the affiliate by April 15<sup>th</sup> of the following contract year (which is January 1 to December 31 annually). The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

	2018	2017
AMA Administrative service fee	14,613,057	26,813,402
Current year estimated accrued true-up	(10,950,991)	(703,865)
Total administrative Service Fee	3,662,066	26,109,537

These agreements also provide for interest on all intercompany balances. Interest earned on amounts due from affiliates was (\$96,132) in 2018 and (\$38,737) in 2017.

The Company is a party to an agreement which enables the Company to receive manufacturers' pharmacy rebates from AHM under which the Company remits a percentage of its earned pharmaceutical rebates to AHM as a fee. The Company earned pharmaceutical rebates of \$1,860,345 and \$4,469,172, which were recorded as a reduction of medical costs, in 2018 and 2017, respectively. The Company was charged \$186,548 and \$397,578, which were recorded as administrative expenses, for these services in 2018 and 2017, respectively. At December 31, 2018 and 2017, the Company reported \$68,715 and \$348,307, respectively, as amounts due from AHM related to the pharmaceutical rebates which were reflected in health care and other amounts receivable. The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

The amounts reported on the Underwriting and Investment Exhibit, Part 3 represent the expenses incurred under the terms of the administrative agreement, allocated to the Company in accordance SSAP No. 70 - Allocation of Expenses ("SSAP No. 70"). SSAP No. 70 states "shared expenses, including expenses under the terms of a management contract, shall be apportioned to the entities incurring the expense as if the expense had been paid solely by the incurring entity. The apportionment shall be completed based upon specific identification to the entity incurring the expense. Where specific identification is not feasible, apportionment shall be based upon pertinent factors or ratios." The Company allocates these expenses based upon a percentage calculated using actual general and administrative expenses incurred by AHM.

The Company's commercial business is a party to an agreement with Coventry Prescription Management Services ("CPMS"), whereby CPMS pays pharmacy claims on the Company's behalf. The Company pays a monthly fee to CPMS for services provided during that month which is calculated using a per member per month ("PMPM") administrative rate. The PMPM rate is amended annually and the amendments are approved by the Iowa Department. All payments by the Company to CPMS are reduced by a PMPM pharmacy rebate credit. The Company paid CPMS \$0 and \$3,196,965 in capitation fees for the years ended December 31, 2018 and 2017, respectively. CPMS paid the Company \$0 and \$316,044 in pharmacy rebates for the years ended December 31, 2018 and 2017, respectively.

MHNet Specialty Services, LLC ("MHNet"), a related party, provides mental health services to the Company's members. The Company pays MHNet a monthly fee based on a PMPM capitation rate. The rates are amended annually and the amendments are approved by the Iowa Insurance Department. The Company paid MHNet \$93,758 and \$259,920 in capitation fees for the years ended December 31, 2018 and 2017, respectively.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is CVS Health.

- H. At December 31, 2018, the Company did not own shares of any upstream intermediate of CVS Health.
- I. At December 31, 2018, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity that exceeded 10% of the Company's admitted assets.
- J. At December 31, 2018, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2018, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2018, the Company did not hold any investments in a downstream noninsurance holding company.
- M. At December 31, 2018, the Company did not have any SCA investments.
- N. At December 31, 2018, the Company did not have any investments in an insurance SCA.
- O. The Company did not have any SCA investments where the Company's share of losses in the SCA exceeds its investment in the SCA.

11. Debt

- A. The Company did not have any items related to debt, including capital notes at December 31, 2018.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2018.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at December 31, 2018 or 2017.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

- (1) The Company had 1,000,000 shares of common capital stock authorized, issued and outstanding with a par value of \$5 per share at 253,567 shares issued and outstanding at December 31, 2018 and 2017.

- (2) The Company had no shares of preferred stock issued and outstanding at December 31, 2018 and 2017.

(3) Dividend Restrictions

Dividends on the Company's common capital stock are paid as declared by its Board of Directors, from earned surplus of the Company, not including surplus arising from the sale of stock. Generally, dividends may be paid on the Company's common capital stock without obtaining regulatory approval at an amount up to the greater of: a) the prior year net gain from operations, or b) ten percent of the prior year ending capital and surplus. In addition, the minimum Risk Based Capital requirements of the NAIC and, if applicable, the Iowa Insurance Department must be maintained.

- (4) The Company did not pay any dividends in 2018 or 2017.
- (5) Within the limitations of 3) above, there are no other restrictions placed on the portion of the Company profits that may be paid as ordinary dividends to the stockholder.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2018 or 2017, except as noted in Note 21.
- (7) Not applicable to the Company.
- (8) The Company did not hold any stock for any special purposes at December 31, 2018 or 2017.
- (9) Changes in the balances of special surplus funds from the prior year are due to the accrual of estimated ACA health insurer fees reclassified from unassigned funds or surplus to aggregate write-ins for special surplus funds as discussed more fully in Note 1.C and Note 22.

- (10) At December 31, 2018 and 2017, there were no unassigned funds that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2018 or 2017.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Liabilities, Contingencies and Assessments

A. The Company did not have any contingent commitments at December 31, 2018 or 2017.

B. Assessments

Guaranty Fund Assessments

Under guaranty fund laws existing in all states, insurers doing business in those states can be assessed (in most states up to prescribed limits) for certain obligations of insolvent insurance companies to policyholders and claimants. The life and health insurance guaranty associations in which CVS Health and certain of its affiliates, including the Company participate that operate under these laws respond to insolvencies of long-term care insurers as well as health insurers. The Company's assessments generally are based on a formula relating to the Company's health care premiums in the state compared to the premiums of other insurers. Certain states allow assessments to be recovered over time as offsets to premium taxes. Some states have similar laws relating to HMOs and/or other payers such as not-for-profit consumer-governed health plans established under Health Care Reform.

- C. The Company did not have any gain contingencies at December 31, 2018 or 2017.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2018 or 2017.
- E. The Company did not have any joint and several liability arrangements at December 31, 2018 or 2017.
- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books.

The Company has coverage for certain litigation exposures (\$10,000,000 per claim and in the aggregate including defense costs) through an unaffiliated insurance company.

15. Leases

The Company did not have any material lease obligations at December 31, 2018 or 2017.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2018 or 2017.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

- (1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2018 and 2017.

B. Transfer and Servicing of Financial Assets

- (1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103R is discussed in Note 1. Excludes repurchase and reverse repurchase transactions as



discussed in Notes 5.F. through 5.I. The Company did not have any loaned securities at December 31, 2018 and 2017.

(2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2018 or 2017.

(4) The Company did not have any securitized financial assets at December 31, 2018 or 2017.

(5) The Company did not have any transfers of financial assets accounted for as secured borrowing at December 31, 2018 or 2017.

(6) The Company did not have any transfers of receivables with recourse at December 31, 2018 or 2017.

(7) The Company did not have any dollar repurchase or reverse repurchase agreements at December 31, 2018 or 2017.

#### C. Wash Sales

(1) In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio.

(2) The Company had no securities sold during the year for the year ended December 31, 2018 and reacquired within 30 days of the sale date.

#### 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2018.

B. The Company did not serve as an Administrative Services Contract (ASC) plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2018.

C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2018.

#### 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2018 and 2017.

#### 20. Fair Value Measurements

A. and B.

Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

- **Level 1** – Unadjusted quoted prices for identical assets or liabilities in active markets.
- **Level 2** – Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.
- **Level 3** – Developed from unobservable data, reflecting the Company's own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, the Company uses these quoted market prices to determine the fair value of financial assets and liabilities and classifies these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, the Company estimates fair value using valuation

methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

C. The carrying values and estimated fair values of the Company's financial instruments at December 31, 2018 and 2017 were as follows:

December 31, 2018

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds, Short Term, and Cash Equivalent	41,071,873	40,992,598	2,296,743	38,775,130			

December 31, 2017

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds, Short Term and Cash Equivalent	82,217,558	81,773,929	11,137,887	71,079,671	—		

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2018 or 2017. There were no transfers between the Company's Level 1 or 2 financial assets during 2018 or 2017.

In evaluating the Company's management of interest rate and liquidity risk and currency exposures, the fair values of all assets and liabilities should be taken into consideration, not only those presented above.

- D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.
- E. The Company has not elected to use the net asset value practical expedient to fair value to measure its investments.

21. Other Items

A. Unusual or Infrequent Items

The Company did not have any unusual or infrequent items for the years ended December 31, 2018 and 2017.

B. Troubled Debt Restructuring

The Company did not have any troubled debt restructuring in the years ended December 31, 2018 and 2017.

C. Other Disclosures

(1) Minimum Capital and Surplus

Pursuant to the laws of the states in which the Company is licensed to do business, the Company is required to maintain a minimum surplus and capital stock as defined by the statutes and regulations of those states. At both December 31, 2018 and 2017, the Company was in compliance with the minimum surplus and capital stock requirements of the states in which it is licensed to do business.

The NAIC and the State of Iowa adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging

from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2018 and 2017, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act (collectively, "Health Care Reform" or the "ACA"), has made broad-based changes to the U.S. health care system. If the ACA is not further amended, repealed or replaced, certain of its components will continue to be phased in until 2022. While the Company anticipates continued efforts in 2019 and beyond to invalidate, modify, repeal or replace Health Care Reform, the Company expects aspects of Health Care Reform to continue to significantly impact the Company's business operations and financial results, including pricing, medical benefit ratios ("MBRs") and the geographies in which the Company's products are available.

While most of the significant aspects of Health Care Reform became effective during or prior to 2014, parts of Health Care Reform continue to evolve through the promulgation of executive orders, regulations and guidance as well as ongoing litigation. Additional changes to Health Care Reform and those regulations and guidance at the federal and/or state level are likely, and those changes are likely to be significant. Growing state and federal budgetary pressures make it more likely that any changes, including changes at the state level in response to changes to, or invalidation, repeal or replacement of, Health Care Reform and/or changes in the funding levels and/or payment mechanisms of federally supported benefit programs, will be adverse to us. For example, if any elements of Health Care Reform are invalidated or repealed at the federal level, the Company expects that some states would seek to enact similar requirements, such as prohibiting pre-existing condition exclusions, prohibiting rescission of insurance coverage, requiring coverage for dependents up to age 26, requiring guaranteed renewability of insurance coverage and prohibiting lifetime limits on insurance coverage.

Potential repeal of Health Care Reform, ongoing legislative, regulatory and administrative policy changes to Health Care Reform, the results of congressional and state level elections, the December 2018 U.S. District Court decision invalidating Health Care Reform and other pending litigation challenging aspects of the law or funding for the law and federal budget negotiations continue to create uncertainty about the ultimate impact of Health Care Reform. The pending litigation challenging Health Care Reform includes challenges by various states of the federal government's decision to curtail payments related to the Cost-Sharing Subsidy Program. The time frame for conclusion and final outcome and ultimate impact of this litigation are uncertain. Given the inherent difficulty of foreseeing the nature and scope of future changes to Health Care Reform and how states, businesses and individuals will respond to those changes, the Company cannot predict the impact on it of future changes to Health Care Reform. It is reasonably possible that invalidation, repeal or replacement of or other changes to Health Care Reform and/or states' responses to such changes, in the aggregate, could have a significant adverse effect on the Company's businesses, financial results and cash flows.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2018 or 2017.
- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2018 or 2017.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2018 or 2017.
- G. The Company did not have any retained assets at December 31, 2018 or 2017.
- H. The Company did not have any insurance-linked securities ("ILS") contracts at December 31, 2018 or 2017.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through February 27, 2019 for the statutory statement issued on March 1, 2019.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized Subsequent Events

Subsequent events have been considered through February 27, 2019 for the statutory statement issued on March 1, 2019.

As discussed in Note 1, in January 2018, the HIF was suspended for 2019. As a result, there is no annual health insurance industry fee payable on September 30, 2019 and there are no amounts reflected in the Company's aggregate write-ins for special surplus funds related to this payable at December 31, 2018 as a result. There is also no resulting impact to the Company's RBC to assess as of December 31, 2018 as a result of this suspension.

Type II - Nonrecognized Subsequent Events:		Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	YES	—	—
B. ACA fee assessment payable for the upcoming year		—	4,241,000
C. ACA fee assessment paid		4,226,283	—
D. Premium written subject to ACA 9010 assessment		—	211,056,525
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 14)		39,873,513	—
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)		39,873,513	—
G. Authorized Control Level (Five-Year Historical Line 15)		1,155,358	—
H. Would reporting the ACA assessment as of Dec. 31, 2017 have triggered an RBC action level (YES/NO)?	NO		

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?  
Yes ( ) No (X)  
If yes, give full details.
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?  
Yes ( ) No (X)  
If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than nonpayment of premium or other similar credit?  
Yes (X) No ( )
- a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate.  
\$\_\_\_\_N/A.

- b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability for these agreements in this statement?  
\$ N/A.

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

If yes, give full details.

### Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the insurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate.

\$ N/A

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No (X)

If yes, what is the amount of reinsurance credit, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$ N/A

B. The Company did not have uncollectible reinsurance at December 31, 2018.

C. The Company did not have any commutation of ceded reinsurance at December 31, 2018.

D. The Company's certified reinsurer's rating has not been downgraded or its status subject to revocation at December 31, 2018.

### 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. and B.

The Company did not have any retrospectively rated contracts in 2018 or 2017.

### C. Contracts Subject to Retrospective Rating Features

The Company accrues amounts payable to or receivable from the federal government related to its contracts with the OPM to provide or arrange health services under the FEHB program for federal employees, annuitants and their dependents. These contracts with the OPM and applicable government regulations establish premium rating requirements for the FEHB program. At December 31, 2018 and 2017, the Company had premiums related to its contracts with the OPM of \$231,982 and \$0, respectively, representing 0.7% and 0.0% of the Company's total premiums at December 31, 2018 and 2017, respectively.

The OPM, through its Office of the Inspector General, conducts periodic audits of its contractors to, among other things, verify that the premiums charged to the OPM were established in compliance with the community rating and other requirements under the FEHB program. These audits often result in findings for which the Company establishes a specific reserve. For those years under contract which have not been audited by the OPM, the Company establishes a general audit liability which is the result of a historical study of average audit payments. In addition, for all years under contract, the Company annually performs rate reconciliations which may result in amounts owed to or receivable from the OPM.

Audit findings, historical study of audit payments, and rate reconciliations have resulted in reserves of \$669,103 and \$901,085, which were recorded as aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus at December 31, 2018 and 2017, respectively.

The Company contracts with OPM to provide managed health care services under the FEHB program in their service areas. OPM regulations require that FEHB plans meet a FEHB program-specific MLR by plan code and

market. The Company reported FEHB MLR reserves of \$700,000 and \$0 in aggregate policy reserves at December 31, 2018 and 2017, respectively.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

The Company is required to make premium rebate payments to customers that are enrolled under certain health insurance policies if specific minimum annual MLR were not met in the prior year. The Company's results for full-year 2018 and 2017 included an estimate of \$4,176,399 and \$4,430,213, respectively, of minimum MLR rebates, which were included in aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus. The Company paid \$0 of minimum MLR rebates in 2018 for the year 2017.

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with	Total
Prior Reporting Year					
(1) Medical Loss Ratio Rebates Incurred	—	—	247,056	—	247,056
(2) Medical Loss Ratio Rebates Paid	—	—	626,964	—	626,964
(3) Medical Loss Ratio Rebates Unpaid	—	—	4,430,213	—	4,430,213
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates Unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,430,213
Current Reporting Year-to-Date					
(1) Medical Loss Ratio Rebates Incurred	—	—	(253,814)	—	(253,814)
(2) Medical Loss Ratio Rebates Paid	—	—	—	—	—
(3) Medical Loss Ratio Rebates Unpaid	—	—	4,176,399	—	4,176,399
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates Unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,176,399

E. Risk Sharing Provisions of the Affordable Care Act (ACA)

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes [ X ] No [ ]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	210,219
Liabilities (including high-risk pool payments)	
2. Risk adjustment user fees payable for ACA Risk Adjustment	1,144
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	—
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	5,867,794
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	(9,175)
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA Reinsurance	49,070
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	
Liabilities	
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	
5. Ceded reinsurance premiums payable due to ACA Reinsurance	
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA Reinsurance	
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	5
9. ACA Reinsurance contributions – not reported as ceded premium	
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA Risk Corridors	1,253
Liabilities	
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	
Operations (Revenue & Expense)	
3. Effect of ACA Risk Corridors on net premium income (paid/received)	
4. Effect of ACA Risk Corridors on change in reserves for rate credits	

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written		Received or Paid as of the Current Year on		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	Before December 31 of the Prior Year		Written Before December 31 of the Prior Year								
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high-risk)			11,756		(11,756)	—	11,756		A	—	—
2. Premium adjustments (payable) (including high-risk pool payments)		17,390,934		11,745,115	—	5,645,819		(5,645,819)	B	—	—
3. Subtotal ACA Permanent Risk Adjustment Program	—	17,390,934	11,756	11,745,115	(11,756)	5,645,819	11,756	(5,645,819)		—	—
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	1,464,446		1,415,381		49,065	—	5		C	49,070	—
2. Amounts recoverable for claims unpaid (contra liability)					—	—			D	—	—
3. Amounts receivable relating to uninsured plans					—	—			E	—	—
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium					—	—			F	—	—
5. Ceded reinsurance premiums payable					—	—			G	—	—
6. Liability for amounts held under uninsured plans					—	—			H	—	—
7. Subtotal ACA Transitional Reinsurance Program	1,464,446	0	1,415,381	0	49,065	—	5	—		49,070	—
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	24,924		23,671		1,253	—			I	1,253	—
2. Reserve for rate credits or policy experience rating refunds					—	—			J	—	—
3. Subtotal ACA Risk Corridors Program	24,924	—	23,671	—	1,253	—	—	—		1,253	—
d. Total for ACA Risk Sharing Provisions	1,489,370	17,390,934	1,450,808	11,745,115	38,562	5,645,819	11,761	(5,645,819)		50,323	—

Explanations of Adjustments

A. Due to updates to the data available to the Company to calculate the risk adjustment.

B. Due to updates to the data available to the Company to calculate the risk adjustment.

C. Due to additional claims run-out after the December 31, 2017 period.

D.

E.

F.

G.

H.

I. Due to updated data available to the Company to calculate the risk corridor payables. Also includes the impact of the adjustments to the reinsurance recoveries and risk adjustments.

J.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Risk Corridors Program Year	Accrued During the Prior Year on Business Written		Received or Paid as of the Current Year on		Differences		Adjustments		Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable (Payable)
a. 2014										
1. Accrued retrospective premium	24,924		23,671		1,253	—			A	1,253 —
2. Reserve for rate credits or policy experience rating refunds					—	—			B	— —
b. 2015										
1. Accrued retrospective premium					—	—			C	— —
2. Reserve for rate credits or policy experience rating refunds					—	—			D	— —
c. 2016										
1. Accrued retrospective premium					—	—			E	— —
2. Reserve for rate credits or policy experience rating refunds					—	—			F	— —
d. Total for Risk Corridors	24,924	—	23,671	—	1,253	—	—	—		1,253 —

Explanations of Adjustments

A. Due to updates to the data available to the Company to calculate the risk adjustment.

B.

C.

D.

E.

F.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-admissions)	5 Non-admitted Amount	6 Net Admitted Asset (4 - 5)
a. 2014	2,707,708	2,253,037	453,418	1,253		1,253
b. 2015	705,180	705,180		—		—
c. 2016	1,370,536	1,370,536		—		—
d. Total (a + b + c)	4,783,424	4,328,753	453,418	1,253	—	1,253

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)  
24E(5)d (Column 6) should equal 24E(2)c1

25. Change in Incurred Claims and Claims Adjustment Expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ended December 31, 2018 and 2017.



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE AETNA HEALTH OF IOWA INC.

	2018	2017
Balance, January 1	\$33,542,768	\$29,417,755
Health care receivable	(348,307)	(43,376)
Balance, January 1, net of health care receivable	33,194,461	29,374,379
Incurred related to:		
Current year	24,335,279	177,852,747
Prior years	(5,682,541)	(8,872,835)
Total incurred	18,652,738	168,979,912
Paid related to:		
Current year	21,341,776	145,590,122
Prior years	23,836,369	19,569,708
Total paid	45,178,145	165,159,830
Balance, December 31, net of health care receivable	6,669,054	33,194,461
Health care receivable	68,715	348,307
Balance, December 31	\$6,737,769	\$33,542,768

In 2018, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$5,682,541 from \$33,542,768 in 2017 to \$27,860,227 in 2018. In 2017, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$8,872,835 from \$29,417,755 in 2016 to \$20,544,920 in 2017. The lower than anticipated health care cost trend rates observed in 2018 and 2017 for claims incurred in 2017 and 2016 , respectively, were due to moderating outpatient and physician trends and faster than expected claim payment speed. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Historical health care cost trend rates are not necessarily representative of current trends. The Company experienced \$10,927 of favorable prior year claim development on retrospectively rated policies, which is included in the net 2017 decrease. However, the business to which it relates is subject to premium adjustments. The Company excluded the impact of the change in health care receivables related to pharmacy rebates from the above roll-forward to conform to NAIC Annual Statement presentation.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

26. Intercompany Pooling Arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2018 or 2017.

27. Structured Settlements

Not applicable to health entities.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

The Company receives pharmaceutical rebates through an agreement with AHM. AHM has contractual agreements with pharmaceutical companies for rebates, which cover the Company's membership as well as the membership of other Aetna affiliates. The Company receives those rebates from AHM that relate to the Company's membership. The Company estimates pharmaceutical rebate receivables based upon the historical payment trends, actual utilization and other variables. Actual rebates collected are applied to the collection periods below, using a first in first out methodology. At December 31, 2018 and 2017, the Company had pharmaceutical rebate receivables of \$68,715 and \$348,307, respectively (refer to the Company's accounting practices related to pharmaceutical rebate receivables in Note 1).

The following table discloses the quarterly revenue and subsequent cash collections relating to the pharmaceutical rebates discussed in Note 10.

Date	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2018	224,300	—	156,832	—	—
09/30/2018	283,878	297,662	297,662	—	—
06/30/2018	269,934	270,491	269,981	—	—
03/31/2018	248,774	355,179	354,442	—	—
12/31/2017	929,718	2,319,521	1,061,022	—	—
09/30/2017	596,264	1,278,121	1,278,121	—	—
06/30/2017	587,531	1,328,259	1,328,274	—	—
03/31/2017	952,540	932,918	933,464	—	—
12/31/2016	101,822	102,108	102,108	—	—
09/30/2016	79,340	76,414	76,414	—	—
06/30/2016	469,404	468,207	468,207	—	—
03/31/2016	454,769	511,065	511,065	—	—

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2018 or 2017.

29. Participating Policies

The Company did not have any participating policies at December 31, 2018 or 2017.

30. Premium Deficiency Reserves

December 31, 2018

1. Liability carried for premium deficiency reserves

\$788,788
2. Date of the most recent evaluation of this liability

12/31/2018
3. Was anticipated investment income utilized in the calculation?

YES

31. Anticipated Salvage and Subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....  
If yes, complete Schedule Y, Parts 1, 1A and 2

Yes [ X ] No [ ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....

Yes [ X ] No [ ] N/A [ ]

1.3

State Regulating? .....

Iowa

1.4

Is the reporting entity publicly traded or a member of a publicly traded group? .....

Yes [ X ] No [ ]

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....

0000064803

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....

Yes [ ] No [ X ]

2.2

If yes, date of change: .....

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made. ....

12/31/2015

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....

12/31/2015

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....

07/06/2017

3.4

By what department or departments?  
Iowa Insurance Division .....

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....

Yes [ ] No [ ] N/A [ X ]

3.6

Have all of the recommendations within the latest financial examination report been complied with? .....

Yes [ ] No [ ] N/A [ X ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business? .....  
4.12 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business? .....  
4.22 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....  
If yes, complete and file the merger history data file with the NAIC.

Yes [ ] No [ X ]

5.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....

Yes [ ] No [ X ]

6.2

If yes, give full information: .....

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....

Yes [ ] No [ X ]

7.2

If yes,  
7.21 State the percentage of foreign control; .....  
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

0.0 %

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [ ] No [ X ]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [ ] No [ X ]

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

KPMG LLP, One Financial Plaza, 755 Main Street, Hartford, CT 06103

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [ ] No [ X ]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [ ] No [ X ]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [ ] No [ ] N/A [ X ]

10.6

If the response to 10.5 is no or n/a, please explain  
Coventry Health Care, Inc. ("CHC") merged into Aetna Health Holdings LLC ("AHH") on 1/1/14. Aetna Health of Iowa Inc. ("AHI-IA") designated the Audit Committee of its immediate parent AHH to be AHI-IA's Audit Committee.

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Paul M. Conlin, FSA, MAAA; 151 Farmington Avenue, RE2R; Hartford, CT 06156

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ] No [ X ]

12.11

Name of real estate holding company

12.12

Number of parcels involved

0

12.13

Total book/adjusted carrying value

\$0

12.2

If, yes provide explanation:

13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

N/A

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [ ] No [ ]

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [ ] No [ ]

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [ ] No [ ] N/A [ ]

14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [ X ] No [ ]

(a)

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b)

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c)

Compliance with applicable governmental laws, rules and regulations;

(d)

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e)

Accountability for adherence to the code.

14.11

If the response to 14.1 is No, please explain:

14.2

Has the code of ethics for senior managers been amended?

Yes [ X ] No [ ]

14.21

If the response to 14.2 is yes, provide information related to amendment(s).  
Through November 28, 2018, senior management was subject to the Aetna Inc. Code of Conduct. Effective with the acquisition of Aetna Inc. by CVS Health Corporation, senior management become subject to the CVS Health Code of Conduct.

14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [ ] No [ X ]

14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.
- Yes [ ] No [ X ]

1 American Bankers Association (ABA) Routing Number	2  Issuing or Confirming Bank Name	3  Circumstances That Can Trigger the Letter of Credit	4  Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person?
- Yes [ X ] No [ ]
- Yes [ X ] No [ ]
- Yes [ X ] No [ ]

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers
- 20.12 To stockholders not officers
- 20.13 Trustees, supreme or grand (Fraternal Only)
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers
- 20.22 To stockholders not officers
- 20.23 Trustees, supreme or grand (Fraternal Only)
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others
- 21.22 Borrowed from others
- 21.23 Leased from others
- 21.24 Other
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment
- 22.22 Amount paid as expenses
- 22.23 Other amounts paid
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:
- Yes [ ] No [ X ]
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- \$ 0
- Yes [ ] No [ X ]
- \$ 0
- \$ 0
- \$ 0
- Yes [ ] No [ X ]
- \$ 0

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)
- 24.02 If no, give full and complete information relating thereto
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided) We are not currently investing in the securities lending program as of 12/31/2018.
- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions?
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs.
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs.
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?
- 24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending?
- Yes [ X ] No [ ]
- 
- 
- Yes [ ] No [ ] N/A [ X ]
- \$ 0
- \$ 0
- Yes [ ] No [ ] N/A [ X ]
- Yes [ ] No [ ] N/A [ X ]
- Yes [ ] No [ ] N/A [ X ]

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	0
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	0
24.103	Total payable for securities lending reported on the liability page.	\$	0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03).

Yes [ ] No [ X ]

25.2	If yes, state the amount thereof at December 31 of the current year:	25.21 Subject to repurchase agreements	\$	0
		25.22 Subject to reverse repurchase agreements	\$	0
		25.23 Subject to dollar repurchase agreements	\$	0
		25.24 Subject to reverse dollar repurchase agreements	\$	0
		25.25 Placed under option agreements	\$	0
		25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$	0
		25.27 FHLB Capital Stock	\$	0
		25.28 On deposit with states	\$	0
		25.29 On deposit with other regulatory bodies	\$	0
		25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$	0
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$	0
		25.32 Other	\$	0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [ ] No [ X ]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes [ ] No [ ] N/A [ X ]

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [ ] No [ X ]

27.2 If yes, state the amount thereof at December 31 of the current year.

\$ 0

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [ X ] No [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
State Street Bank and Trust Company	State Street Financial Center; One Lincoln Street; Boston, MA 02111-2900

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [ ] No [ X ]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Kevin J. Casey as Sr. Investment Officer .....	A.....
.....	.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?..... Yes [ ] No [ X ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [ ] No [ X ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
N/A .....	Kevin J. Casey .....	- .....	Not registered .....	.....
- .....	- .....	- .....	- .....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? ..... Yes [ ] No [ X ]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....	.....	.....	.....

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	40,990,173	41,069,448	79,275
30.2 Preferred stocks .....	0	0	0
30.3 Totals	40,990,173	41,069,448	79,275

30.4 Describe the sources or methods utilized in determining the fair values:  
Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information, or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short-term investments are carried at amortized cost which approximated fair value. The carrying value of cash equivalents approximated fair value. ....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ X ] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ X ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
.....

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]

32.2 If no, list exceptions:  
.....

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

33.

By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
b. Issuer or obligor is current on all contracted interest and principal payments.  
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
Has the reporting entity self-designated 5GI securities? .....

Yes [ ] No [ X ]
34.

By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  
a. The security was purchased prior to January 1, 2018.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.  
Has the reporting entity self-designated PLGI securities? .....

Yes [ ] No [ X ]

OTHER

35.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....1,818

35.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Council for Affordable Quality Healthcare .....	625
.....	

36.1 Amount of payments for legal expenses, if any? .....\$ .....36,652

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....	

37.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	



GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force? .....

Yes [ ] No [ X ]

1.2

If yes, indicate premium earned on U.S. business only. ....

\$ 0

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? .....

\$ 0

1.31

Reason for excluding

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above .....

\$ 0

1.5

Indicate total incurred claims on all Medicare Supplement Insurance. ....

\$ 0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned .....

\$ 0

1.62

Total incurred claims .....

\$ 0

1.63

Number of covered lives .....

0

All years prior to most current three years:

1.64

Total premium earned .....

\$ 0

1.65

Total incurred claims .....

\$ 0

1.66

Number of covered lives .....

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned .....

\$ 0

1.72

Total incurred claims .....

\$ 0

1.73

Number of covered lives .....

0

All years prior to most current three years:

1.74

Total premium earned .....

\$ 0

1.75

Total incurred claims .....

\$ 0

1.76

Number of covered lives .....

0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator .....

31,105,777

211,056,525

2.2

Premium Denominator .....

31,105,777

211,056,525

2.3

Premium Ratio (2.1/2.2) .....

1.000

1.000

2.4

Reserve Numerator .....

13,030,239

56,232,507

2.5

Reserve Denominator .....

13,030,239

56,232,507

2.6

Reserve Ratio (2.4/2.5) .....

1.000

1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? .....

Yes [ ] No [ X ]

3.2

If yes, give particulars:

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? .....

Yes [ X ] No [ ]

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? .....

Yes [ ] No [ ]

5.1

Does the reporting entity have stop-loss reinsurance? .....

Yes [ ] No [ X ]

5.2

If no, explain:  
The Company is of sufficient size to absorb large losses and does not require reinsurance to protect against the occasional large claim.

5.3

Maximum retained risk (see instructions)

5.31

Comprehensive Medical .....

\$ 0

5.32

Medical Only .....

\$ 0

5.33

Medicare Supplement .....

\$ 0

5.34

Dental & Vision .....

\$ 0

5.35

Other Limited Benefit Plan .....

\$ 0

5.36

Other .....

\$ 0

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:  
Provider contracts contain hold harmless and continuity of coverage provisions. ....

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?.....

Yes [ X ] No [ ]

7.2

If no, give details

8.

Provide the following information regarding participating providers:

8.1

Number of providers at start of reporting year .....

35,449

8.2

Number of providers at end of reporting year .....

33,791

9.1

Does the reporting entity have business subject to premium rate guarantees? .....

Yes [ ] No [ X ]

9.2

If yes, direct premium earned:

9.21

Business with rate guarantees between 15-36 months..

\$ 0

9.22

Business with rate guarantees over 36 months .....

\$ 0

28

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

GENERAL INTERROGATORIES

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? ..... Yes [ X ] No [ ]

10.2 If yes:

10.21 Maximum amount payable bonuses.....\$ .....3,434,803

10.22 Amount actually paid for year bonuses.....\$ .....2,543,573

10.23 Maximum amount payable withholds.....\$ .....0

10.24 Amount actually paid for year withholds.....\$ .....0

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, ..... Yes [ ] No [ X ]

11.13 An Individual Practice Association (IPA), or, . Yes [ ] No [ X ]

11.14 A Mixed Model (combination of above)? ..... Yes [ ] No [ X ]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes [ X ] No [ ]

11.3 If yes, show the name of the state requiring such minimum capital and surplus. .... Iowa

11.4 If yes, show the amount required. ....\$ .....2,310,716

11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes [ ] No [ X ]

11.6 If the amount is calculated, show the calculation

See Notes to Financial Statement - Note 21, Other Items, C., Other Disclosures.

12. List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
License covers entire State of Iowa .....
.....

13.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

13.2 If yes, please provide the amount of custodial funds held as of the reporting date. ....\$ .....0

13.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

13.4 If yes, please provide the balance of funds administered as of the reporting date. ....\$ .....0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [ X ]

14.2 If the answer to 14.1 is yes, please provide the following:

1	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
Company Name						
.....						

15. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written .....\$ .....0

15.2 Total Incurred Claims .....\$ .....0

15.3 Number of Covered Lives .....0

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ ] No [ X ]

16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ X ]

FIVE-YEAR HISTORICAL DATA

	1 2018	2 2017	3 2016	4 2015	5 2014
<b>Balance Sheet</b> (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28) .....	53,997,097	97,012,855	87,496,304	96,874,642	70,866,030
2. Total liabilities (Page 3, Line 24) .....	14,123,584	59,519,883	58,083,134	57,738,710	45,308,055
3. Statutory minimum capital and surplus requirement .....	2,310,716	1,000,000	1,000,000	1,000,000	1,000,000
4. Total capital and surplus (Page 3, Line 33) .....	39,873,513	37,492,972	29,413,170	39,135,932	25,557,975
<b>Income Statement</b> (Page 4)					
5. Total revenues (Line 8) .....	31,818,696	209,641,637	240,427,327	311,389,870	198,523,521
6. Total medical and hospital expenses (Line 18) .....	18,652,738	165,593,789	210,935,474	267,790,297	177,400,361
7. Claims adjustment expenses (Line 20) .....	562,437	3,386,123	4,247,450	4,841,507	2,873,462
8. Total administrative expenses (Line 21) .....	8,607,686	31,901,143	39,424,560	41,748,855	24,536,293
9. Net underwriting gain (loss) (Line 24) .....	3,207,047	8,760,582	(14,180,157)	(2,990,789)	(6,286,595)
10. Net investment gain (loss) (Line 27) .....	814,036	1,496,114	978,041	791,708	786,733
11. Total other income (Lines 28 plus 29) .....	0	0	0	(30,303)	0
12. Net income or (loss) (Line 32) .....	2,004,575	8,346,000	(7,295,647)	(2,142,276)	(3,628,282)
<b>Cash Flow</b> (Page 6)					
13. Net cash from operations (Line 11) .....	(29,502,607)	28,260,770	7,359,014	16,319,120	(11,695,732)
<b>Risk-Based Capital Analysis</b>					
14. Total adjusted capital .....	39,873,513	37,492,972	29,413,170	39,135,932	25,557,975
15. Authorized control level risk-based capital .....	1,155,358	6,919,526	8,541,079	10,500,281	7,041,228
<b>Enrollment</b> (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7) .....	4,025	37,863	50,127	68,848	58,864
17. Total members months (Column 6, Line 7) .....	67,758	527,788	686,635	902,114	641,951
<b>Operating Percentage</b> (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5) .....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19) .....	58.6	79.0	87.7	86.0	89.4
20. Cost containment expenses .....	1.2	1.4	1.5	1.1	1.0
21. Other claims adjustment expenses .....	0.6	0.2	0.3	0.4	0.4
22. Total underwriting deductions (Line 23) .....	89.9	95.8	105.9	101.0	103.2
23. Total underwriting gain (loss) (Line 24) .....	10.1	4.2	(5.9)	(1.0)	(3.2)
<b>Unpaid Claims Analysis</b> (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Col. 5) .....	27,453,703	18,923,435	36,550,735	30,353,063	9,817,121
25. Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)] .....	32,787,937	28,930,099	34,484,946	27,104,012	9,584,493
<b>Investments In Parent, Subsidiaries and Affiliates</b>					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1) .....	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1) .....	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1) .....	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
30. Affiliated mortgage loans on real estate .....	0	0	0	0	0
31. All other affiliated .....	0	0	0	0	0
32. Total of above Lines 26 to 31 .....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above. ....	0	0	0	0	0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? .....

Yes [     ] No [     ]

If no, please explain: .....

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories										
		1	Direct Business Only							
			2	3	4	5	6	7	8	9
States, etc.		Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama	AL	N	0	0	0	0	0	0	0
2.	Alaska	AK	N	0	0	0	0	0	0	0
3.	Arizona	AZ	N	0	0	0	0	0	0	0
4.	Arkansas	AR	N	0	0	0	0	0	0	0
5.	California	CA	N	0	0	0	0	0	0	0
6.	Colorado	CO	N	0	0	0	0	0	0	0
7.	Connecticut	CT	N	0	0	0	0	0	0	0
8.	Delaware	DE	N	0	0	0	0	0	0	0
9.	District of Columbia	DC	N	0	0	0	0	0	0	0
10.	Florida	FL	N	0	0	0	0	0	0	0
11.	Georgia	GA	N	0	0	0	0	0	0	0
12.	Hawaii	HI	N	0	0	0	0	0	0	0
13.	Idaho	ID	N	0	0	0	0	0	0	0
14.	Illinois	IL	N	0	0	0	0	0	0	0
15.	Indiana	IN	N	0	0	0	0	0	0	0
16.	Iowa	IA	L	30,873,795	0	231,982	0	0	31,105,777	0
17.	Kansas	KS	N	0	0	0	0	0	0	0
18.	Kentucky	KY	N	0	0	0	0	0	0	0
19.	Louisiana	LA	N	0	0	0	0	0	0	0
20.	Maine	ME	N	0	0	0	0	0	0	0
21.	Maryland	MD	N	0	0	0	0	0	0	0
22.	Massachusetts	MA	N	0	0	0	0	0	0	0
23.	Michigan	MI	N	0	0	0	0	0	0	0
24.	Minnesota	MN	N	0	0	0	0	0	0	0
25.	Mississippi	MS	N	0	0	0	0	0	0	0
26.	Missouri	MO	N	0	0	0	0	0	0	0
27.	Montana	MT	N	0	0	0	0	0	0	0
28.	Nebraska	NE	N	0	0	0	0	0	0	0
29.	Nevada	NV	N	0	0	0	0	0	0	0
30.	New Hampshire	NH	N	0	0	0	0	0	0	0
31.	New Jersey	NJ	N	0	0	0	0	0	0	0
32.	New Mexico	NM	N	0	0	0	0	0	0	0
33.	New York	NY	N	0	0	0	0	0	0	0
34.	North Carolina	NC	N	0	0	0	0	0	0	0
35.	North Dakota	ND	N	0	0	0	0	0	0	0
36.	Ohio	OH	N	0	0	0	0	0	0	0
37.	Oklahoma	OK	N	0	0	0	0	0	0	0
38.	Oregon	OR	N	0	0	0	0	0	0	0
39.	Pennsylvania	PA	N	0	0	0	0	0	0	0
40.	Rhode Island	RI	N	0	0	0	0	0	0	0
41.	South Carolina	SC	N	0	0	0	0	0	0	0
42.	South Dakota	SD	N	0	0	0	0	0	0	0
43.	Tennessee	TN	N	0	0	0	0	0	0	0
44.	Texas	TX	N	0	0	0	0	0	0	0
45.	Utah	UT	N	0	0	0	0	0	0	0
46.	Vermont	VT	N	0	0	0	0	0	0	0
47.	Virginia	VA	N	0	0	0	0	0	0	0
48.	Washington	WA	N	0	0	0	0	0	0	0
49.	West Virginia	WV	N	0	0	0	0	0	0	0
50.	Wisconsin	WI	N	0	0	0	0	0	0	0
51.	Wyoming	WY	N	0	0	0	0	0	0	0
52.	American Samoa	AS	N	0	0	0	0	0	0	0
53.	Guam	GU	N	0	0	0	0	0	0	0
54.	Puerto Rico	PR	N	0	0	0	0	0	0	0
55.	U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0
56.	Northern Mariana Islands	MP	N	0	0	0	0	0	0	0
57.	Canada	CAN	N	0	0	0	0	0	0	0
58.	Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59.	Subtotal	XXX	30,873,795	0	0	231,982	0	0	31,105,777	0
60.	Reporting entity contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0
61.	Total (Direct Business)	XXX	30,873,795	0	0	231,982	0	0	31,105,777	0
DETAILS OF WRITE-INS										
58001.		XXX								
58002.		XXX								
58003.		XXX								
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0

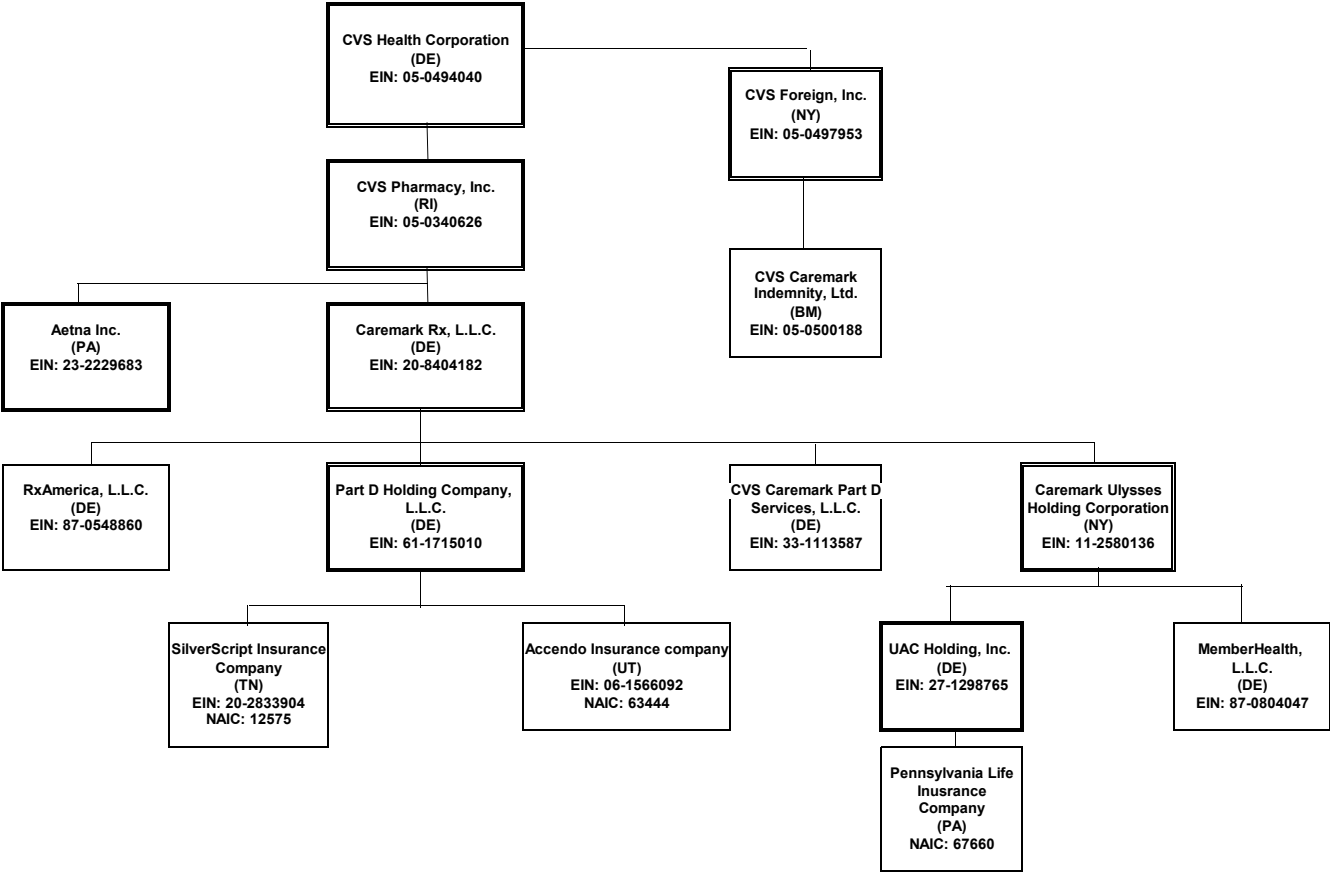
(a) Active Status Counts:  
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....1 R - Registered - Non-domiciled RRGs.....0  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....0 Q - Qualified - Qualified or accredited reinsurer.....0  
N - None of the above - Not allowed to write business in the state.....56

(b) Explanation of basis of allocation by states, premiums by state, etc.  
Iowa is a single state company therefore all premiums are Iowa.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.

(1) Insurers/HMO's

Percentages are rounded to the nearest whole percent and based on ownership of voting rights.

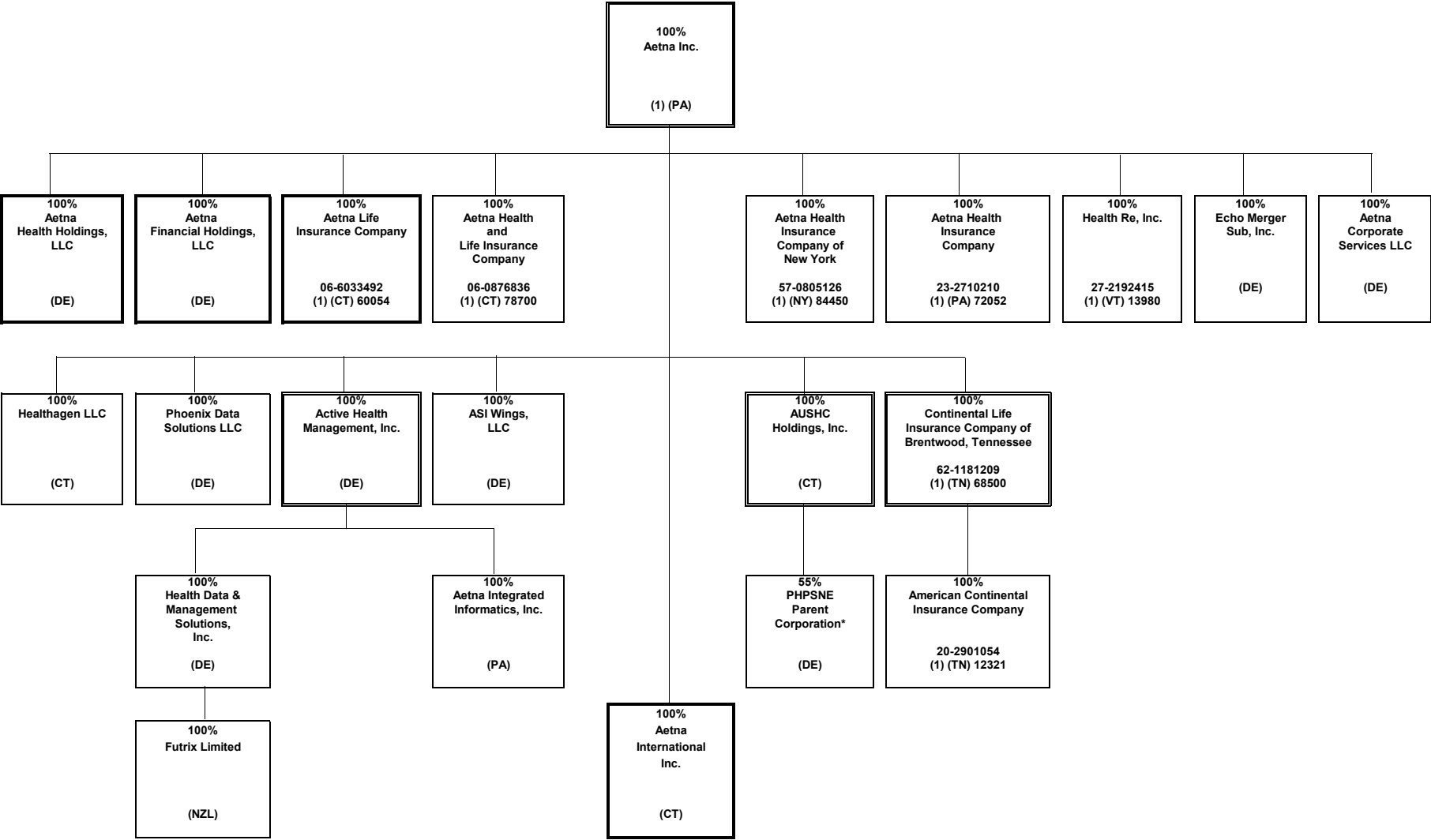
Double borders indicate entity has subsidiaries shown on the same page.

Bold borders indicate entity has subsidiaries shown on a separate page.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

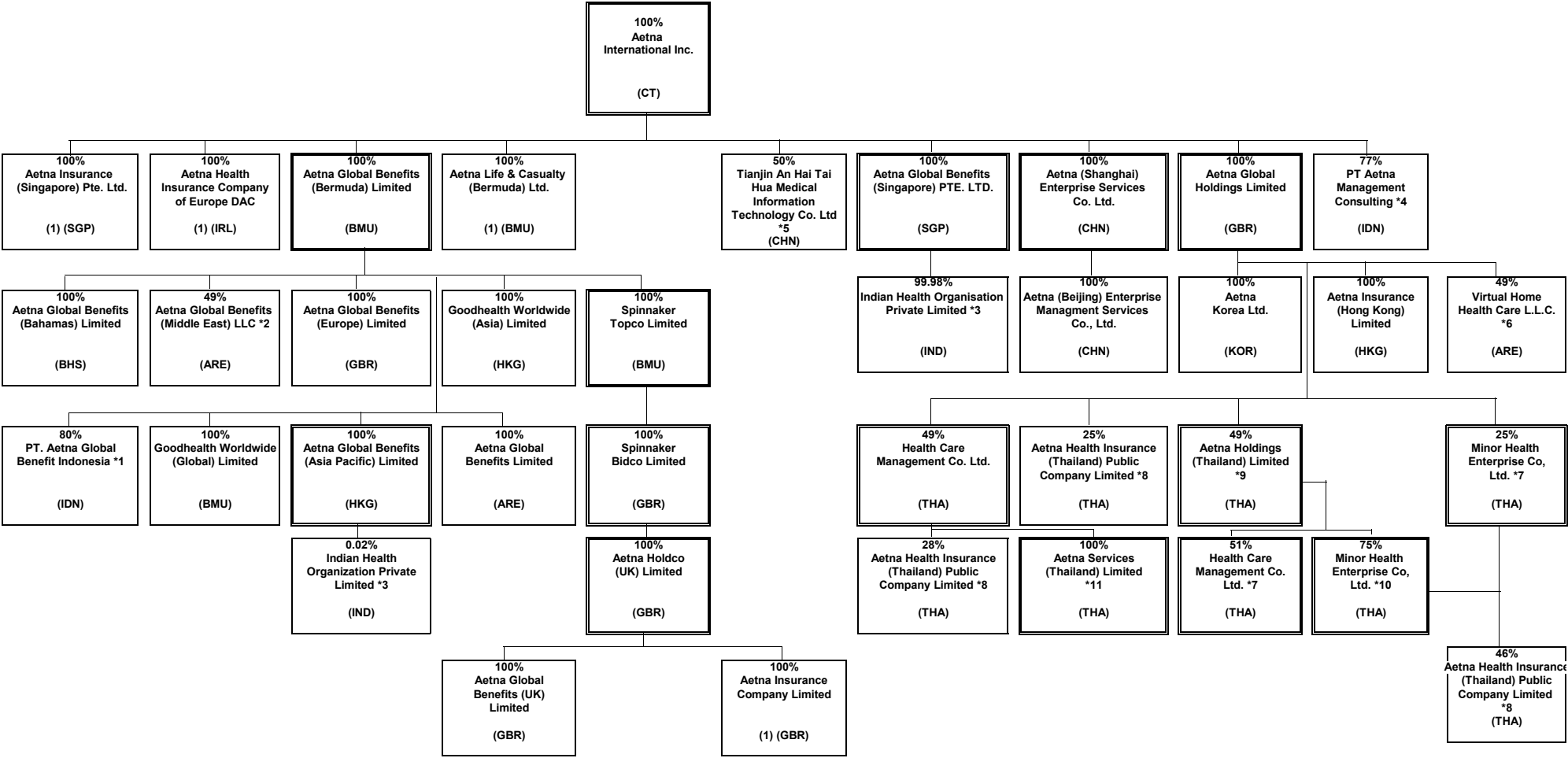


\* PHPSNE Parent Corporation is also 45% owned by third parties.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

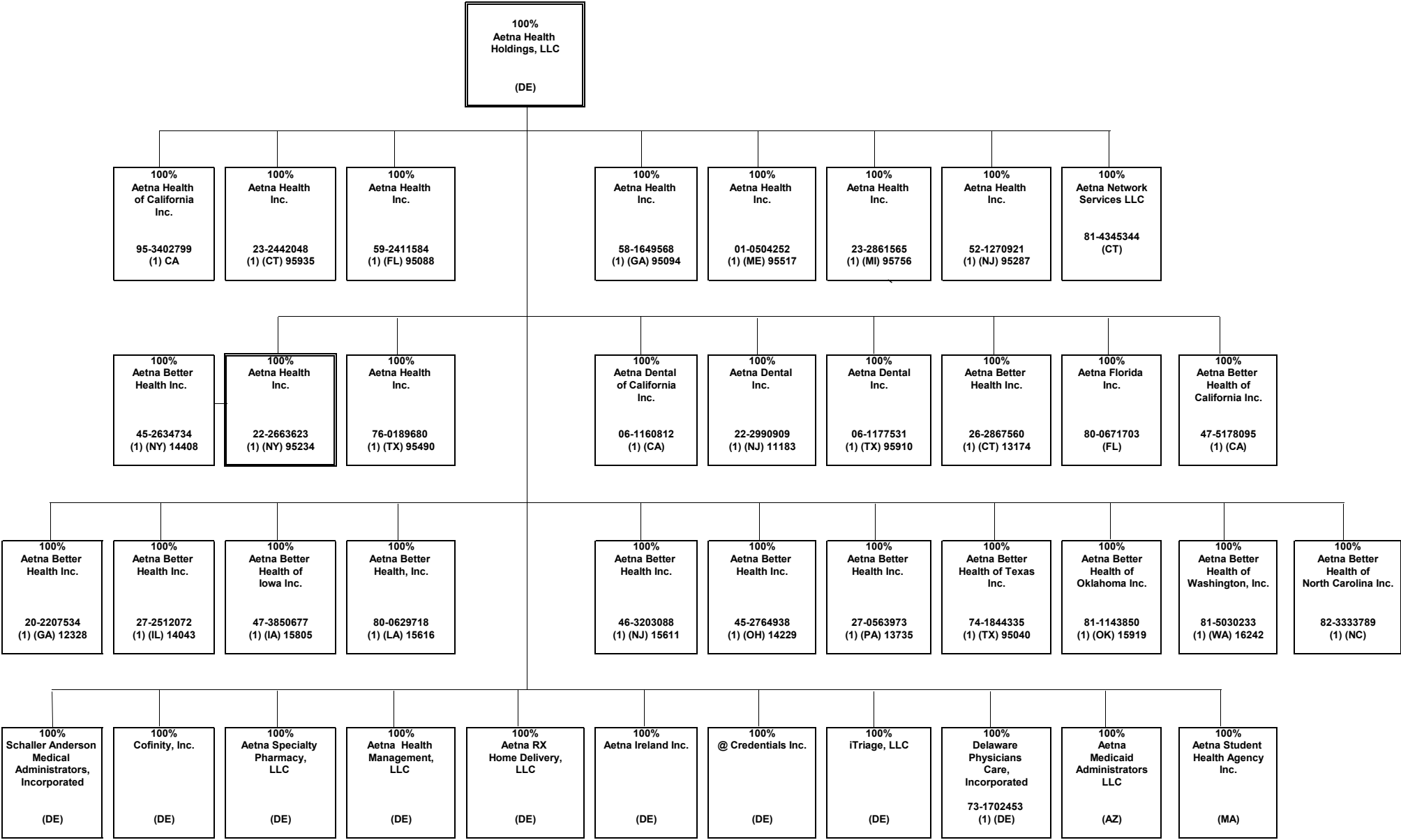


\*1 PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rival, Aetna's Nominee.  
\*2 Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.  
\*3 Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.  
\*4 PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.  
\*5 Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd  
\*6 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee  
\*7 Health Care Management Co. Ltd. is also owned by Aetna Global Benefits (Bermuda) Limited (1 share).  
\*8 Aetna Health Insurance (Thailand) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 Share), Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)  
\*9 Aetna Holdings (Thailand) Limited is aslo 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Benefits (Bermuda) Limited owns 1 share.  
\*10 Minor Health Enterprise Co, Ltd is is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited  
\*11 Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited and (1 share) owned by Aetna Global Holdings Limited

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

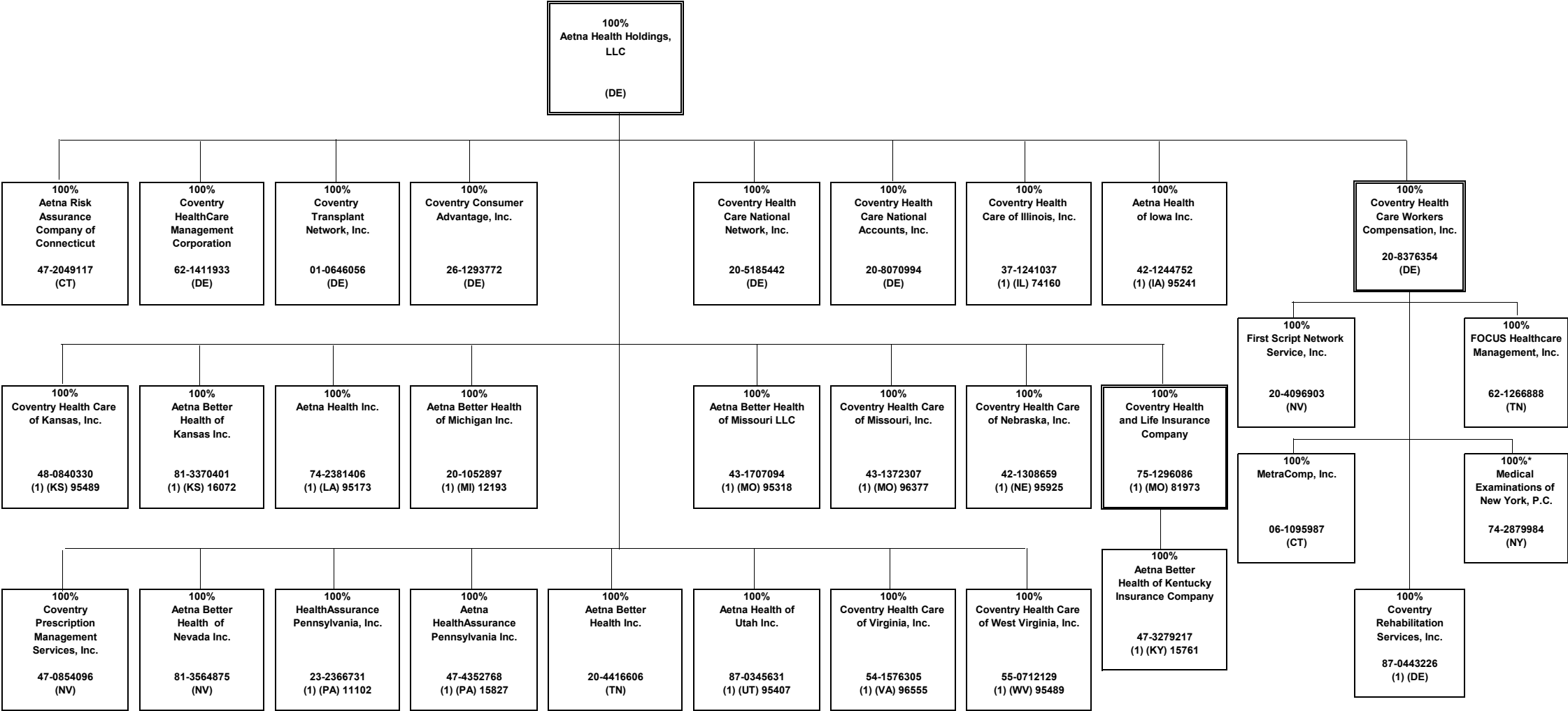
PART 1 - ORGANIZATIONAL CHART





SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

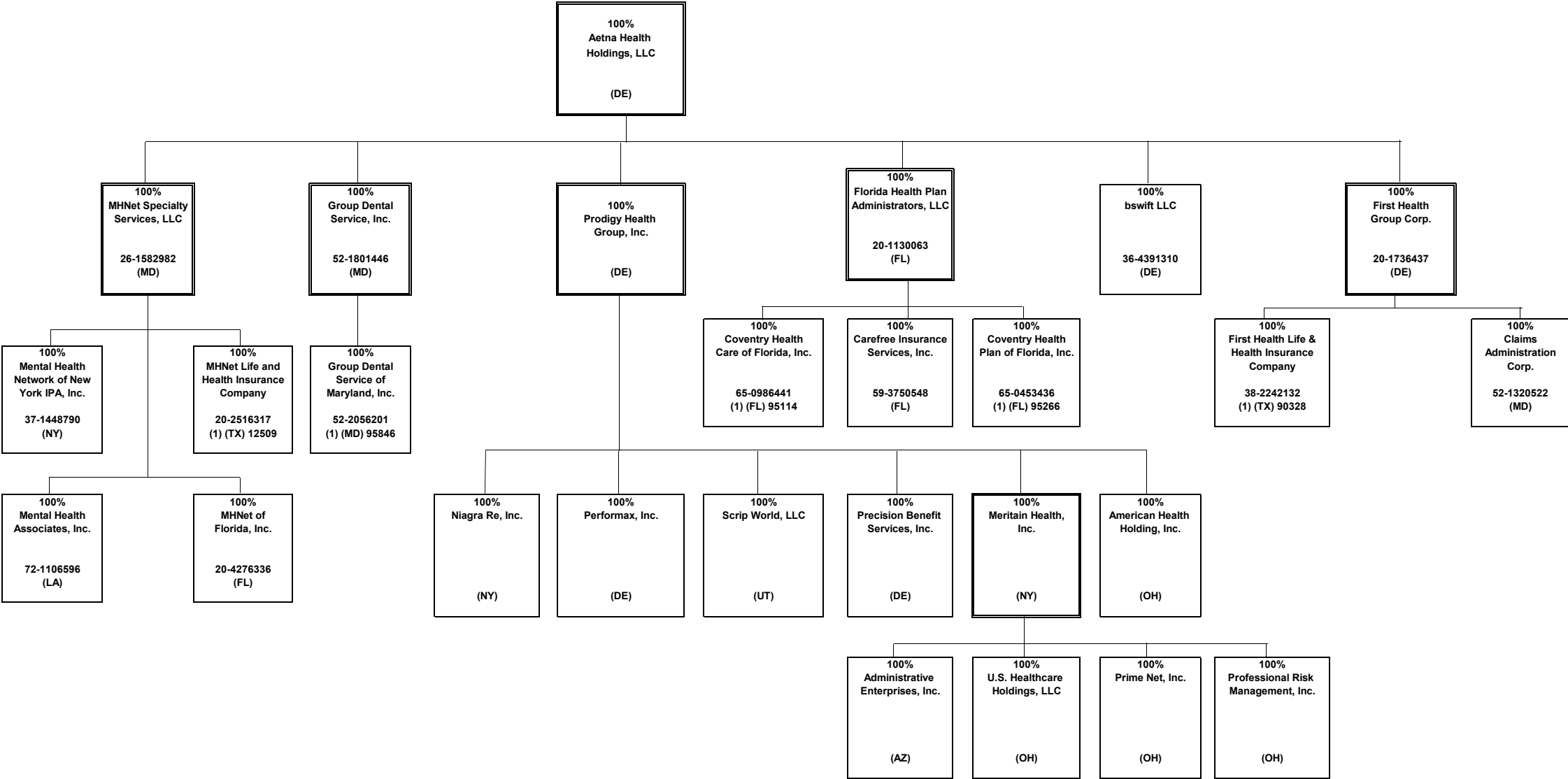


\*100% owned through Aetna's nominees

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

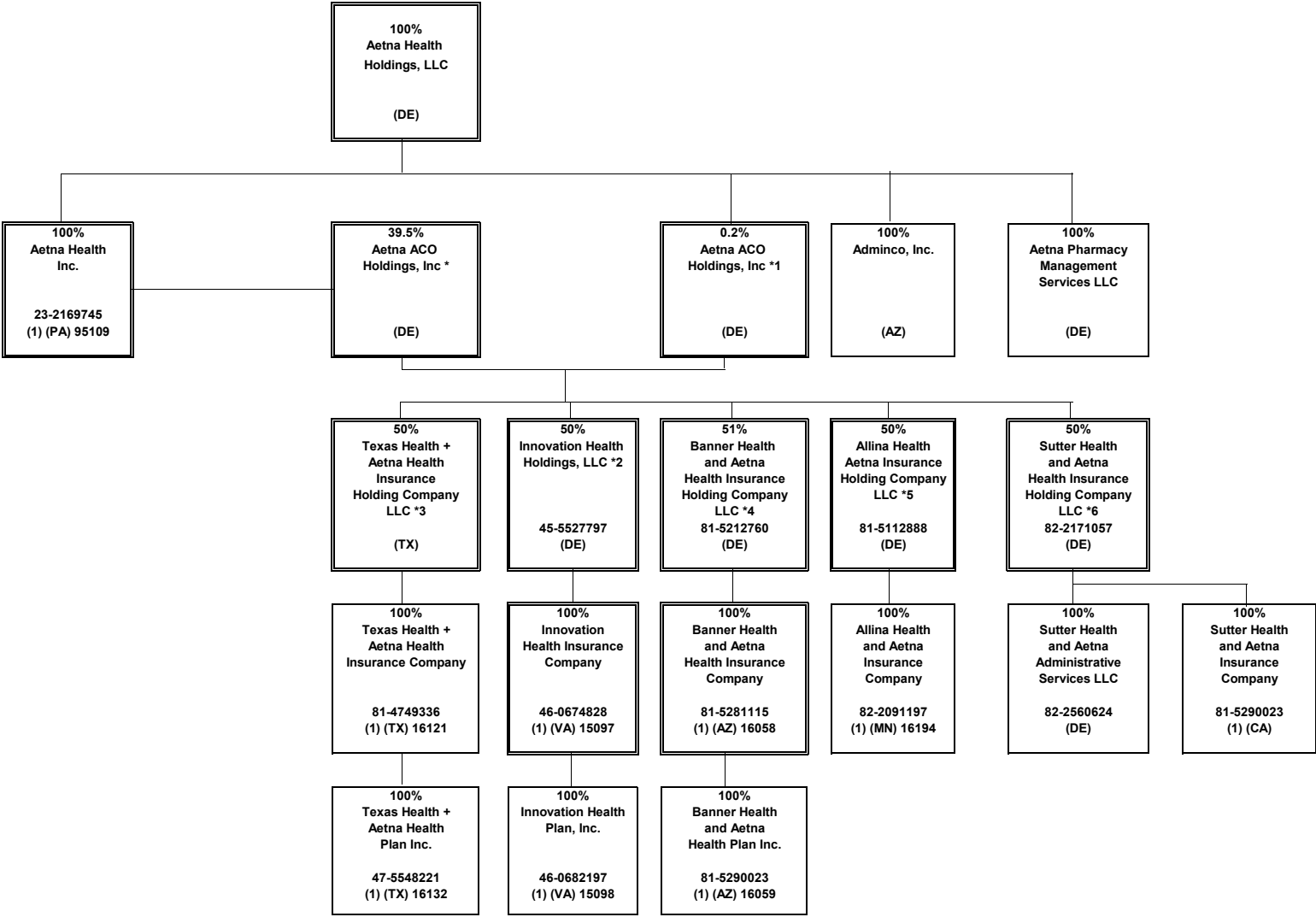
PART 1 - ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

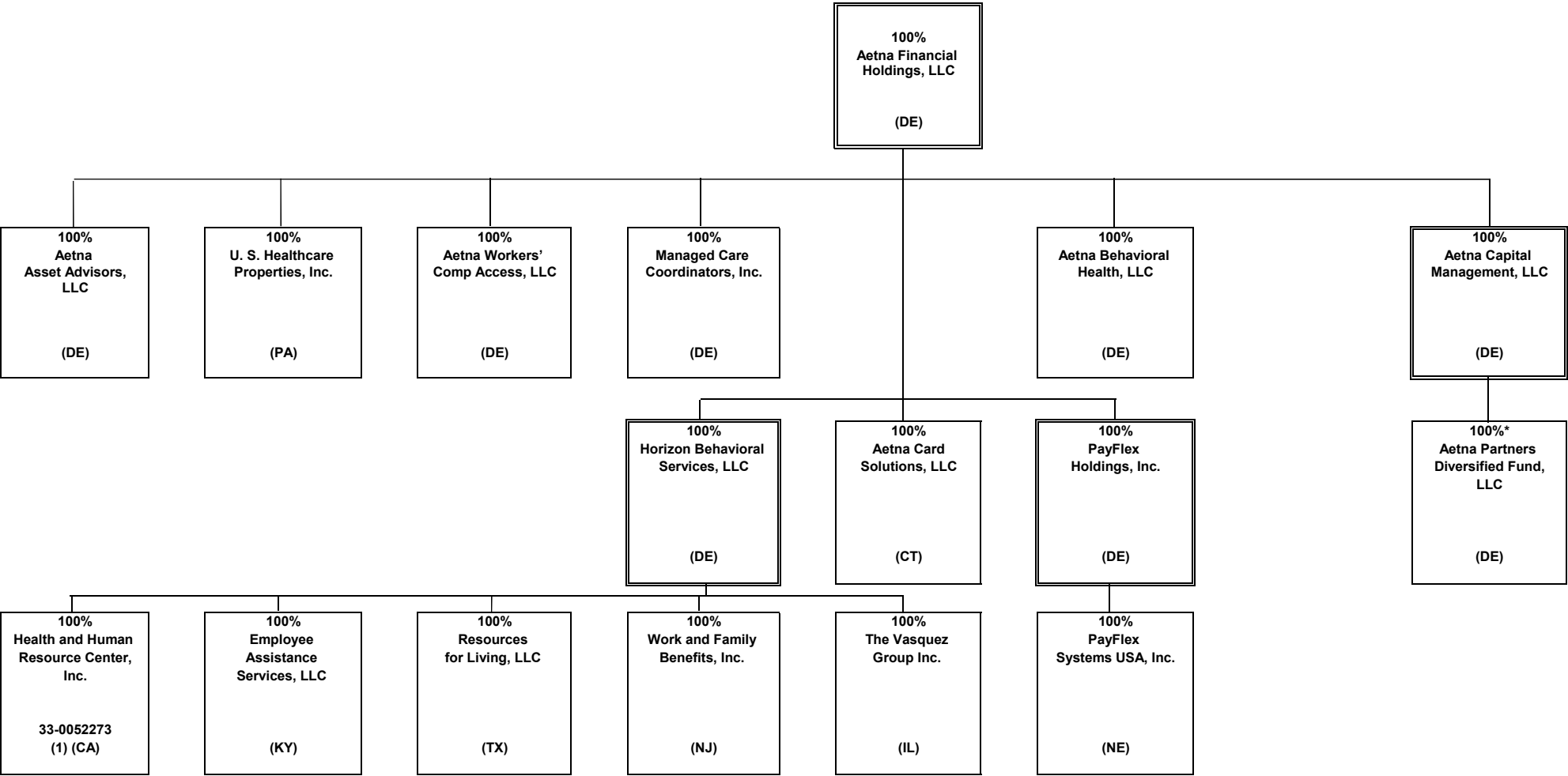
PART 1 - ORGANIZATIONAL CHART



\*1 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).  
\*2 Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.  
\*3 Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.  
\*4 Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.  
\*5 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.  
\*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

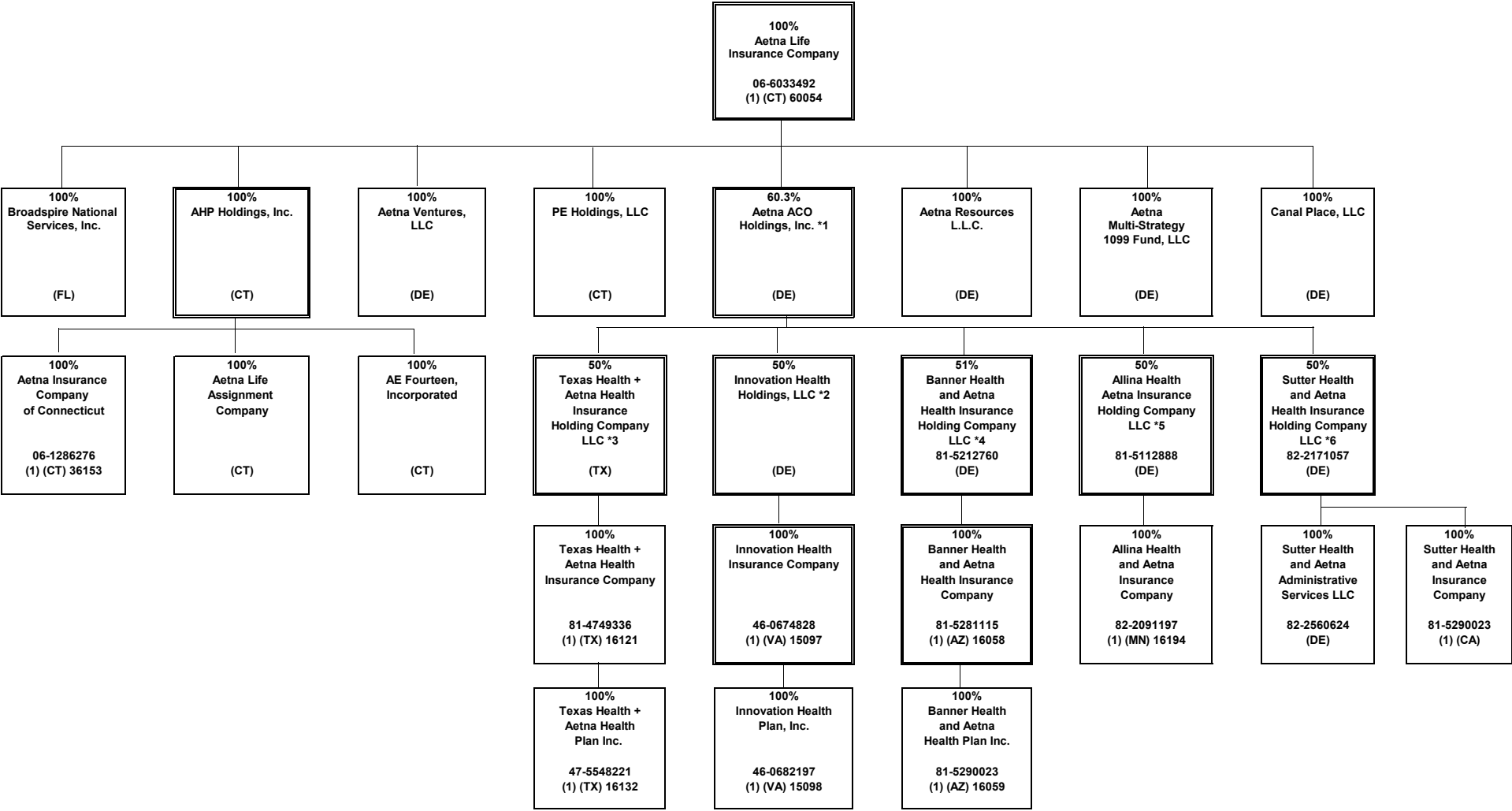


\* Aetna Life Insurance Company owns substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



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\*5 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

\*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
2504. Interest expense .....	0	388	80,235	0	80,623
2597. Summary of remaining write-ins for Line 25 from overflow page	0	388	80,235	0	80,623

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Aetna Health of Iowa Inc.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 1 Line 6

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
0604. ....	0	0	0	0	0	0
0605. ....	0	0	0	0	0	0
0606. ....	0	0	0	0	0	0
0697. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0

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